



P.O. Box 819 • 20 Thompson Road, Branford, CT 06405-0819
800-243-6624 • Fax 800-345-7819
www.seton.com

Reseller Application

Thank you for your interest in Seton's Reseller Program. To proceed with your request, please complete and sign the **Reseller Application Form**.

One of the submittals you will need to include to qualify is information showing your reseller status with other manufacturers of identification, safety, security, maintenance, or contractor products and supplies. In addition, you will need to commit to annual purchases of at least \$500.

If your company qualifies for tax-exempt status and you are located in CT, NY or WI, or you will require Seton to drop-ship to one of these states, please submit a copy/copies of your **Tax-Exempt Certificate** as issued by these states.

To expedite the application process, please fax 1-800-345-7819 or email Resellers@seton.com the completed application and additional information. Upon receipt, we will process your application and send official notification of your status. If you have any questions, please feel free to contact us at 1-800-571-2596.

Our goal is to have every customer want to come back again and again!



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1. COMPANY INFORMATION

Name: _____ Title: _____

Company Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Web Address: _____ Years in Business: _____

Email Address: _____

Signature: _____ Date: _____

2. TYPE OF BUSINESS:

Sic Code: _____

Resale Wholesale Retail

3. Please attach copies of your company's advertising or marketing literature referencing the product lines you are distributing (line card, sales literature, catalog page, yellow page ad, etc.)

THIS MATERIAL IS REQUIRED TO PROCESS YOUR APPLICATION

4. List the principal manufacturers for which your company is an authorized reseller:

<u>Manufacturer</u>	<u>Mfg. Phone No.</u>	<u>Mfg. Contact Name</u>
_____	_____	_____
_____	_____	_____

5. Please return this completed application to:

Seton Identification Products
20 Thompson Road
Branford, CT 06405
Fax: 1-800-345-7819
Email: Resellers@seton.com

Upon approval, a \$500 annual purchase commitment is required.

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