

TIPS Reseller Purchase Order Process

- 1 The dealer needs to submit a proposal to the end user that references each contract they are using, but specifically, it needs to reference “HAT TIPS 230301” in the description of each product that is being quoted from HAT. The dealer needs to be sure they are using the correct HAT end user pricing in this proposal. Discounting can be found in the dealer portal under contracts.
- 2 The end-user needs to be registered with TIPS. If they are not already, they can do that here, www.tips-usa.com/membership.cfm. It is free for them to register.
- 3 The end user signs the proposal and returns it to the dealer. Whatever document the end user returns to the dealer as an order, it must reference “HAT TIPS 230301,” preferable next to each item from HAT.
- 4 The dealer would submit their PO to TIPS (tipspo@tips-usa.com) along with the “Reseller Form” and all of the documents requested in the reseller form.
- 5 In the reseller form, Human Active Technology is the awarded vendor, and our contract # is 230301.



Reseller Form for TIPS Sale

ALL INFORMATION MUST BE COMPLETED

TIPS Awarded Vendor: _____

Awarded Vendor's TIPS Contract #: _____

Vendor's Authorized Reseller: _____

Is Reseller listed under "RESELLER" tab of TIPS Vendor's profile on TIPS website: Y _____ N _____ (If not, Vendor will need to add)

Your End-User/Customer: _____

Is the End-User/Customer a registered TIPS Member of TIPS: Y _____ N _____ (If not, they will need to join. See <https://www.tips-usa.com/membership.cfm>)

TIPS Member's Purchase Order #: _____

Dollar amount charged TO THE TIPS MEMBER (Your End-User/Customer) for this purchase: \$ _____

Note: Admin fees are based on the amount actually invoiced and paid on TIPS sale by TIPS member. Fees are not assessed for shipping cost, required bond cost or any taxes that may be applicable.

Required Documentation:

Please send the following documentation to tipspo@tips-usa.com merged as **one (1) PDF** attachment if possible.

NOTE: Incomplete/missing documents will be returned with request to supply **ALL** required documents.

____ Copy of this completed form

____ Copy of the TIPS Member's (End-User/Customer's) Purchase Order or Signed Quote

____ Copy of quote to TIPS Member (End-User/Customer) with TIPS Awarded Vendor's Name & Contract Number referenced.

Printed name of authorized representative providing information: _____

Signature of Authorized Representative: _____

Title: _____

Company: _____ **Date:** _____



Purchasing Made Personal

Need Assistance? 866-839-8477

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