



DEALER INFORMATION:

NAME _____

COMPANY NAME _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____

FAX _____

EMAIL _____

Request date _____

Copy of Proposed Promotion or Detailed Description of Campaign

Estimate of the total cost: _____

(ie: Ads run 4 months @ X amount of cost per month)

Restrictions:

Maximum allowable floor warming credit is \$2000*

*Renewable after 6 months upon review of program

Minimum \$500 investment required to qualify

Co-op credits cannot be combined with any other coupons or discount offers

Shipping costs excluded from credits

FOR WARMLYYOURS OFFICE USE ONLY

CO-OP PROGRAM NO. _____

COUPON CODE _____

MARKETING APPROVAL _____ DATE _____

ACCOUNT MANAGER APPROVAL _____ DATE _____