



Dear Perspective Dealer:

Thank you for your interest in becoming a dealer of Knight's Manufacturing Company (KMC) located at 701 Columbia Blvd. Titusville, FL 32780. Please understand this letter is the initial step in the process of becoming a **Valued Dealer** with KMC.

All weapons, suppressors, night vision and subsequent parts and accessories sold by Knight's are ITAR Controlled items and therefore subject to the export regulations under 22 CFR ITAR Parts 120-130. Knight's, as a U.S. supplier, will not enter into tenders, contracts or other agreements that conflict with ATF and ITAR laws and regulations. These control guidelines will be further disclosed in the Dealer Agreement you will be asked to execute later in the dealer setup process.

Becoming a **Valued Dealer** entitles you to special discounted (Dealer) pricing designed to allow you to competitively market the products. A price sheet and our Dealer Agreement will be forwarded to you after approval is granted from the information provided below. Keeping your Dealership status with Knight's requires consistent business and cumulative purchases of the following:

- Gun Dealer \$40,000 annual sales / \$10,000 minimum initial order
- Parts and Accessories Dealer \$10,000 annual sales / \$2,500 minimum initial order
- Each order after initial order is required to be \$500.00 or more.

Once dealership status is approved, our **Sales Team** will contact your company in regards to processing initial order. Please complete profile below and email back to [salesteam@knightarmco.com](mailto:salesteam@knightarmco.com)

### **COMPANY PROFILE**

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Company Organization: Sole Proprietorship\_\_\_\_ Corporation\_\_\_\_ Partnership\_\_\_\_

Date organized\_\_\_\_\_

FFL:\_\_\_\_\_ Expiration Date\_\_\_\_\_

SOT:\_\_\_\_\_ Expiration Date\_\_\_\_\_

Principal Officers or Owners:

1) Name:\_\_\_\_\_ Title:\_\_\_\_\_

2) Name:\_\_\_\_\_ Title:\_\_\_\_\_

Please identify the individual (s) in your company responsible for sales, service, and administration:

Sales:\_\_\_\_\_

Service:\_\_\_\_\_

Administration:\_\_\_\_\_

### **FINANCIAL INFORMATION**

Sales for last year: \_\_\_\_\_

Sales for current year: \_\_\_\_\_

Sale forecast for next year \_\_\_\_\_

Bank Name: \_\_\_\_\_

Bank Address: \_\_\_\_\_

Business references (U.S. references only would be appreciated), including name, address, telephone number and person to contact:

a) \_\_\_\_\_

b) \_\_\_\_\_

c) \_\_\_\_\_

Do you have an objection to our contacting any business references? Yes\_\_\_\_ No\_\_\_\_

Please provide a current financial statement and/or annual report

### **MARKETING INFORMATION**

Describe types of products represented or sold, including brand names:

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How long have you been in the weapons and/or nightvision business? \_\_\_\_years

Projected sales of our products for the next fiscal year \_\_\_\_\_

Would you be interested in maintaining product for demonstration in your country? Yes\_\_\_\_ No\_\_\_\_

Please describe your product display facility and/or product demonstration procedures:

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Person providing information: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_  
(must be owner or officer of company)

Should you need to contact us for any further information please phone, email or write to the addresses provided below. We look forward to helping you with your business needs.

Sincerely,

Knight's Armament Co. Sales Team  
701 Columbia Blvd  
Titusville, FL 32780  
321-607-9900