

To our Valued Marine Dealers:

As we near the end of the 2011 selling season, Navico would like to thank you for your support and assistance in helping us experience the degree of sales success we have enjoyed. Effective January 1, 2012, the SIS program applies to Lowrance products only. B&G and Simrad reimbursement is outlined in our new Owners Advantage Program (OAP) Section 6A.

The System Installation Subsidy (S.I.S.) program acknowledges the vital role that you, the Dealer, have in the proper selection and installation of Lowrance brands. To expedite your rebate reimbursement the following procedures must be followed:

- 1. Sign and return the S.I.S. Dealer Application no later than March 31, 2012. If application is not received by March 31, 2012 then you will not be eligible to submit S.I.S. claims for the 2012 year.**
- 2. Install the Unit or System on the consumer's boat.**
- 3. Complete the appropriate claim form for the unit being installed. Only units listed on the current year form are eligible for reimbursement. Do not add items to the claim form.**
- 4. All fields on claim forms must be completed. Incomplete claim forms will not be paid.**
- 5. Claim forms must be submitted within 90 days of installation to be eligible for reimbursement.**
- 6. S.I.S. reimbursements will be made in the form of a credit memo for direct customers and via check for indirect customers.**
- 7. Units sold directly to OEM/Boat Builders are not eligible for S.I.S. reimbursement.**

When these procedures are followed you should receive monthly reimbursement from the date the claim form is received. Incomplete forms and forms for units not eligible for payment will not be paid or returned. Reimbursements will not be issued without a signed 2012 S.I.S. Dealer Application on file, Section 5C.

Please email sis@navico.com or call 603-324-2042 if you have any questions or need assistance.

Respectfully yours,



Bob Jasek
Vice President-Sales

The System Installation Subsidy (S.I.S.) Program is effective January 1, 2012 through December 31, 2012 and is Navico's way of acknowledging the vital role Dealers have in the proper selection and installation of Sonar, Radar, VHF Radios and/or Global Positioning System (GPS) products, units, transducers, and accessories. To help Dealers provide this valuable service to Lowrance Consumers, the S.I.S. Program gives a substantial installation reimbursement to the Dealer when they perform the initial installation for the Consumer or arrange for it to be performed by an authorized third-party on select models (see Section 5D for subsidy amounts). Lowrance products must be installed for a Consumer by the Dealer or an authorized third-party to qualify for the installation reimbursement.

To qualify for the S.I.S. Program, you must satisfy either A or B below:

- A. A regular part of your business must include installation of Sonar or GPS products, as well as the sale of boats; or
- B. You must have demonstrated sufficient expertise in Sonar or GPS installation (with sufficient knowledge of boat construction to ensure correct installation of Lowrance products), and installation of Sonar or GPS products must be a regular part of your business.

If you are unable to meet A or B above, you must have a written contractual arrangement with an installer who does meet one of these two qualifications and who will install Lowrance products on a timely basis.

To apply for the S.I.S. Program, Dealers must complete and sign Section 5C — S.I.S. Dealer Application and mail to:

Navico
Attn: S.I.S. Coordinator
410 Amherst Street, Suite 110
Nashua, NH 03063

Navico will review the S.I.S. Application to make a determination of approval. A new S.I.S. Application must be completed and approved each year in order to continue to participate and receive reimbursement for claims.

S.I.S. ONLY DEALERS

Upon approval by your Regional Sales Manager, dealers who perform installations may participate in the S.I.S. Program by completing the S.I.S. Dealer Application. These dealers are not required to meet the requirements of the Dealer Direct Program. As an S.I.S. only Dealer, they may install any Lowrance product that qualifies for the S.I.S. installation reimbursement.

S.I.S. CLAIM WILL ONLY BE PAID WHEN:

- A current S.I.S. application is on file, and
- Installation is performed for the consumer, by the dealer, or an authorized third-party installer.

S.I.S. CLAIM FORM SUBMITTAL

Please follow the procedures outlined below to ensure prompt and accurate reimbursement of your subsidy:

1. Complete the appropriate claim form for the unit being installed. Only units listed on the current year form are eligible for reimbursement. Do not add items to the claim forms.
2. Complete all information on the claim form.

Note: All information on the form must be completed before reimbursement can be rendered. Omission of any information may result in delay of reimbursement or denial of claim. The serial number is the serial number of the unit(s) installed, not the serial number of the boat. If you would like an electronic copy of the S.I.S. claim form, please email sis@navico.com.

3. Make a copy of the Claim Form for your records.

Note: As a service to our S.I.S. Dealers, we have designed a S.I.S. Tracking Information Form (see Section 5F). Although we hope you find this form useful in tracking S.I.S. claims, use of this form is merely recommended and is not required for submitting claims.

4. Mail original form to:
Navico
Attn: S.I.S. Coordinator
410 Amherst Street, Suite 110
Nashua, NH 03063

Email: sis@navico.com

Phone: 603-324-2042

Fax: 603-324-2049

JANUARY 1, 2012 – DECEMBER 31, 2012

⚠ Please Note: Signature Required!

Dealer Name: _____ Customer #: _____ S.I.S #: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone #: _____ Fax #: _____ E-Mail: _____

By: _____ Name: _____
(Signature) (Print Signer's Name)

Title: _____ Date: _____

➔ **Sale and Installation Capability**

Boat Lines Sold: _____

➔ **In-House Installation Capability**

Do you maintain a qualified installer who performs installation for units you sell? YES NO
If your answer is "No", please complete "Third-Party Installation" below.

➔ **Third-Party Installation**

[Complete only if Dealer relies on a third-party installer; installer must sign at the end along with Dealer]

The installer listed below meets all applicable S.I.S. Program requirements and has agreed to install Lowrance products for customers of the Dealer.

⚠ NOTE: If the Dealer relies on a third-party installer, both parties must sign!

Name of third-party installer: _____ Phone: _____ (Please Print)
Street Address: _____
City: _____ State: _____ Zip: _____
By: _____ Date: _____
Signer's Printed Name: _____ Title: _____

➔ **Dealer Tax Status:**

Individual Sole Proprietorship Partnership Corporation LLC

Federal Tax ID #: _____ Social Security #: _____

S. I. S. CERTIFICATION

Each person signing below certifies, acknowledges and agrees to the following:

- a) The information contained on the front of this application is true and accurate to the best of the signer's knowledge. If any information affecting the signer changes, the signer will report the changes in writing to:

Navico
Attn: SIS Coordinator
410 Amherst Street, Suite 110
Nashua, NH 03063
Email: sis@navico.com

- b) The Dealer or the third-party installer (if applicable) meets all the requirements of the Lowrance S.I.S. Program as described in the current fiscal year S.I.S. Program Guideline accompanying this application.
- c) The signer has read and understands the S.I.S. Program Guidelines The signer will contact Navico's Technical Support Department at 800-324-0044 or email le-support@navico.com regarding any questions about transducer selection or installation.
- d) Navico is not responsible for any defective installation or any installation not complying strictly with the Lowrance Installation Manuals.
- e) The Dealer and the third-party installer (if applicable) will each protect and indemnify Navico against all claims related to any defective or non-complying installation.
- f) Navico will NOT under any circumstances be liable to anyone for any special, consequential, incidental, or other indirect damage of any kind.
- g) The third-party installer (if applicable) agrees to perform the installation service for the Dealer's customers, as described in the current program year S.I.S. Program Guidelines. The Dealer and installer are responsible for arranging payment terms between themselves. Navico will reimburse the applicable subsidy amount only to the Dealer as stated in the current program year S.I.S. Program Guidelines and not to the third-party installer.
- h) The signer agrees to provide any reasonably requested information to confirm continuing qualification or compliance.

By: _____ Date: ____/____/____
(Signature)

Signer's Name: _____ Title: _____
(Print)

COMMUNICATIONS	Part Number(s)	S.I.S. Amount
LVR-880U	22-20	\$ 10.00
CHARTPLOTTERS	Part Number(s)	S.I.S. Amount
HDS-7M	140-16	\$ 45.00
ELITE-5M CHARTPLOTTER GOLD	103-001	\$ 30.00
HDS-5M NAUTIC INSIGHT	140-23	\$ 30.00
ELITE-4M CHARTPLOTTER GOLD	10489-001	\$ 10.00
MULTIFUNCTION DISPLAYS	Part Number(s)	S.I.S. Amount
HDS-7	140-05,140-12,140-14,140-34,140-36,10321-001	\$ 75.00
HDS-8	140-06,140-07,140-09,140-39	\$ 75.00
HDS-10	140-00,140-02,140-13,140-41	\$ 75.00
HDS-5	99-001,140-19,140-30,140-20,140-31	\$ 45.00
ELITE-5 BASE COMBO	104-001	\$ 30.00
ELITE-5 DSI BASE	10236-001	\$ 30.00
ELITE-5 GOLD	144-001	\$ 30.00
ELITE-5 DSI GOLD	10245-001	\$ 30.00
ELITE-4 BASE COMBO	10491-001	\$ 10.00
ELITE-4 COMBO GOLD	10493-001	\$ 10.00
ELITE-4 DSI COMBO BASE	10494-001	\$ 10.00
MULTIFUNCTION GAUGES	Part Number(s)	S.I.S. Amount
LMF-200	49-551	\$ 5.00
LMF-400	49-541	\$ 5.00
LST-3800	47-94	\$ 5.00
RADARS	Part Number(s)	S.I.S. Amount
3G BB RADAR KIT	10418-001	\$ 75.00
4G BB RADAR KIT	10419-001	\$ 75.00
LRA-2400	121-39	\$ 75.00
SONAR	Part Number(s)	S.I.S. Amount
ELITE-5X	102-001	\$ 30.00
ELITE-5X DSI	10235-001	\$ 30.00
HDS-5X	140-27, 140-28, 140-29	\$ 30.00
ELITE-4X	10484-001	\$ 10.00
ELITE-4X DSI	10487-001	\$ 10.00
MARK-5X PRO	175-001, 10322-001	\$ 10.00
MARK-5X DSI	10233-001	\$ 10.00
MARK-4 COMBO BASE	10483-001	\$ 10.00
MARK-5X	100-001	\$ 5.00
X-4 PRO	10229-001	\$ 5.00

- a) Consumer information is required for subsidy reimbursement. Consumer may be contacted for confirmation of installation services. All reimbursed subsidies are subject to confirmation.
- b) In the event radar packaging does not feature a validation sticker, please type the serial number in the space provided on the S.I.S. Claim form.
- c) "S.I.S. ONLY DEALERS" – Dealers with a current S.I.S. application but without a signed Authorized Dealer Agreement are considered "S.I.S Only Dealers". They may install any Lowrance product that qualifies for S.I.S. reimbursement.
- d) Units purchased from an Original Equipment Manufacturer (boat builder) do not qualify for S.I.S.

S.I.S. INSTALLATION SUBSIDY CLAIM FORM - LOWRANCE

Dealer Information					
Dealer Name		Dealer #/SIS #		Telephone # (xxx-xxx-xxxx)	
Address		City, State, ZIP		E-mail Address	
Consumer Name					
Consumer Name		Telephone # (xxx-xxx-xxxx)		E-mail Address	
Address		City, State, ZIP		Type of Boat	Length
Unit Installed					
Serial # - Enter Below		Date Installed (MM/DD/YY):			
				Place SIS validation sticker here. If sending via email, stickers are not necessary. Enter the serial # in the Serial # field to the left.	
Put an X beside unit installed (*Unit and GPS module must be installed together for rebate)					

- | | | |
|--|--|---|
| <input type="checkbox"/> 3G BB RADAR KIT (\$75) | <input type="checkbox"/> ELITE-5 DSI GOLD (\$30) | <input type="checkbox"/> LMF-200 (\$5) |
| <input type="checkbox"/> 4G BB RADAR KIT (\$75) | <input type="checkbox"/> ELITE-5M CHTPLT GOLD (\$30) | <input type="checkbox"/> LMF-400 (\$5) |
| <input type="checkbox"/> ELITE-4 (\$10) | <input type="checkbox"/> ELITE-5X (\$30) | <input type="checkbox"/> LRA-2400 (\$75) |
| <input type="checkbox"/> ELITE-4 COMBO GOLD (\$10) | <input type="checkbox"/> ELITE-5X DSI (\$30) | <input type="checkbox"/> LST-3800 (\$5) |
| <input type="checkbox"/> ELITE-4 DSI (\$10) | <input type="checkbox"/> HDS-5 (\$45) | <input type="checkbox"/> LVR-880U (\$10) |
| <input type="checkbox"/> ELITE-4M CHTPLT GOLD (\$10) | <input type="checkbox"/> HDS-5M (\$30) | <input type="checkbox"/> MARK-4 (\$10) |
| <input type="checkbox"/> ELITE-4X (\$10) | <input type="checkbox"/> HDS-5X (\$30) | <input type="checkbox"/> MARK-5X (\$5) |
| <input type="checkbox"/> ELITE-4X DSI (\$10) | <input type="checkbox"/> HDS-7 (\$75) | <input type="checkbox"/> MARK-5X DSI (\$10) |
| <input type="checkbox"/> ELITE-5 BASE (\$30) | <input type="checkbox"/> HDS-7M (\$45) | <input type="checkbox"/> MARK-5X PRO (\$10) |
| <input type="checkbox"/> ELITE-5 DSI BASE (\$30) | <input type="checkbox"/> HDS-8 (\$75) | <input type="checkbox"/> X-4 PRO (\$5) |
| <input type="checkbox"/> ELITE-5 GOLD (\$30) | <input type="checkbox"/> HDS-10 (\$75) | |

CLAIM PROCEDURE

1. Use one claim form per unit installed.
2. Make copy for your files before submitting to Navico
3. S.I.S. not available for units sold directly to boat manufacturer/OEM
4. Current S.I.S. application must be on file at Navico to be eligible
5. S.I.S. card/claim form must be legible and complete to qualify for subsidy
6. Claims must be submitted within 90 days of installation to be eligible for reimbursement
7. Refer to your 2012 Program Book for additional information and claim amounts

Submit claim forms and questions to:

Email: sis@navico.com
 Mail: Navico
 Attn: S.I.S. Coordinator
 410 Amherst Street, Suite 110
 Nashua, NH 03060
 Fax: 603-324-2043
 Phone: 603-324-2042

CAUTION:
 Customer information is required for subsidy payment.
 Customer may be contacted for confirmation of installation services.
 All paid subsidies are subject to such confirmation.

