

## DEALER INFORMATION SHEET

Date \_\_\_\_\_

Name of Dealership \_\_\_\_\_

Street Address \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_ County \_\_\_\_\_

Phone # \_\_\_\_\_ Fax # \_\_\_\_\_ Fed. Tax ID # \_\_\_\_\_

E-Mail \_\_\_\_\_

State Dealer # \_\_\_\_\_ Expires \_\_\_\_\_ State Sales Tax# \_\_\_\_\_

Proprietorship \_\_\_\_\_ Partnership \_\_\_\_\_ Corporation \_\_\_\_\_ State Incorporated \_\_\_\_\_ Date Inc. \_\_\_\_\_

Years in Business \_\_\_\_\_ Years at this Address \_\_\_\_\_ Do you own the dealership property? \_\_\_\_\_

Type of Dealer - Franchised \_\_\_\_\_ Used \_\_\_\_\_ Wholesale \_\_\_\_\_ Retail \_\_\_\_\_ If franchised, Make? \_\_\_\_\_

Owners Name _____	Partner/Officer's Name _____
Home Address _____	Home Address _____
_____	_____
Own or Rent? _____ U.S. Citizen _____	Own or Rent? _____ U.S. Citizen? _____
Home Phone# _____	Home Phone# _____
Date of Birth _____	Date of Birth _____
Drivers License # _____	Drivers License # _____
State _____ Social Security# _____	State _____ Social Security# _____

### **Bank Information** - If you have done business with your bank less than 3 years, give previous bank also.

I expect to pay by Cash \_\_\_\_\_ Business Check \_\_\_\_\_ Draft \_\_\_\_\_

Bank #1 _____	Account # _____
Mailing Address _____	Phone # _____
City, State, Zip _____	
Floor Plan Amount _____	Years doing business together _____
Account Officer _____	
Bank #2 _____	Account # _____
Mailing Address _____	Phone # _____
City, State, Zip _____	
Floor Plan Amount _____	Years doing business together _____
Account Officer _____	

### **Other Auctions You Regularly Attend**

Name _____	City, State _____	Years Attended _____
Name _____	City, State _____	Years Attended _____
Name _____	City, State _____	Years Attended _____

COMPLETED BY: \_\_\_\_\_

OWNER'S / OFFICER'S SIGNATURE	PRINTED NAME	TITLE
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