



## DEALER PACKET CHECK LIST

- DEALER APPLICATION
- AUTHORIZATION FOR EACH SALES REPRESENTATIVE
- BANK RELEASE FORM
- DEALER REGISTRATION AGREEMENT

PLEASE PROVIDE A COPY OF THE FOLLOWING:

- DEALER LICENSE
- BOND
- DRIVERS LICENSE FOR EACH REPRESENTATIVE



4635 N. Thompson  
Springdale, AR 72764  
Phone: 479-756-5001  
Fax: 479-756-5123

### 71B AUTO AUCTION DEALER APPLICATION

Date: \_\_\_\_\_

**BUSINESS INFORMATION: → (Please submit a copy of the DMV Dealer license)**

Name of Dealership \_\_\_\_\_  
(Hereinafter referred to as "Dealer")

Bus. Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip \_\_\_\_\_ Bus. Phone \_\_\_\_\_ Fax \_\_\_\_\_

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

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

Federal ID# \_\_\_\_\_ DMV Dealer # \_\_\_\_\_ State \_\_\_\_\_

**LIST OF OWNERS AND OFFICERS: → (Please submit copies of salesman licenses.)**

1. Name \_\_\_\_\_ Title \_\_\_\_\_ Home Phone \_\_\_\_\_

Home Address \_\_\_\_\_

City, State, & Zip \_\_\_\_\_ Social Security# \_\_\_\_\_

Other contact info: \_\_\_\_\_

2. Name \_\_\_\_\_ Title \_\_\_\_\_ Home Phone \_\_\_\_\_

Home Address \_\_\_\_\_

City, State, & Zip \_\_\_\_\_ Social Security# \_\_\_\_\_

Other contact info: \_\_\_\_\_

3. Name \_\_\_\_\_ Title \_\_\_\_\_ Home Phone \_\_\_\_\_

Home Address \_\_\_\_\_

City, State, & Zip \_\_\_\_\_ Social Security# \_\_\_\_\_

Other contact info: \_\_\_\_\_

**GENERAL INFORMATION**

Email: \_\_\_\_\_ Web site \_\_\_\_\_

When was Dealership organized? \_\_\_\_\_

Please circle:

\* Type of Dealership: Wholesale Retail Used Franchised \* Do you expect to: Sell Buy

\* Title Maintenance: HOLD at auction for pick-up Mail certified(\$10 fee) Mail regular mail (dealer assumes risk)  
71BAA Overnight (\$30 fee) MY Overnight Account Account info \_\_\_\_\_

**CREDIT INFORMATION** (Complete and return enclosed credit reference letter to purchase with company checks.)

Bank \_\_\_\_\_ Name of Official \_\_\_\_\_

Address \_\_\_\_\_

Account # \_\_\_\_\_ Credit or Floor Plan Limit \$ \_\_\_\_\_

Floor Plan Company: \_\_\_\_\_ Branch: \_\_\_\_\_

If you have done business with the previously stated financial institutions for less than one year, please give your previous financial institution(s) name and address.

Bank \_\_\_\_\_ Finance Company \_\_\_\_\_

Address \_\_\_\_\_ Address \_\_\_\_\_

**REFERENCES**

Other Auction you attend \_\_\_\_\_ How long registered? \_\_\_\_\_

Other Auction you attend \_\_\_\_\_ How long registered? \_\_\_\_\_

How did you hear about 71B Auto Auction? \_\_\_\_\_

I certify that the above information is true and accurate to the best of my knowledge and that I have the authority to register this dealership at 71B Auto Auction.

✓ Signature of Dealer \_\_\_\_\_ Title \_\_\_\_\_

✓ Printed Name \_\_\_\_\_ Date \_\_\_\_\_