

# CONFIDENTIAL DEALER APPLICATION

FAX TO 864.269.6447

## Dealership Information

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

DBA if Applicable: \_\_\_\_\_

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

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

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Yrs. In Business: \_\_\_\_\_ Years At Current Location: \_\_\_\_\_ Own  Rent

Corporation  Partnership  Sole Proprietorship  LLC  Amount Requested: \_\_\_\_\_

Is the business incorporated? If so, what is its tax ID number (EIN number) \_\_\_\_\_



## Officer/Owner Information

SS#: \_\_\_\_\_ DOB: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_

Officer/Owner Name: \_\_\_\_\_ Title: \_\_\_\_\_ Drivers License #: \_\_\_\_\_

Home Address: \_\_\_\_\_ Home Phone #: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Years At Current Location: \_\_\_\_\_

Email Address: \_\_\_\_\_ Lease  Own

## Partner/Co-Owner Information

SS#: \_\_\_\_\_ DOB: \_\_\_\_\_ Cell Phone #: \_\_\_\_\_

Officer/Owner Name: \_\_\_\_\_ Title: \_\_\_\_\_ Drivers License #: \_\_\_\_\_

Home Address: \_\_\_\_\_ Home Phone #: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Years At Current Location: \_\_\_\_\_

% of Ownership: \_\_\_\_\_ Email Address: \_\_\_\_\_ Lease  Own

Do any of the owners have any on-going lawsuits they are defending or any judgements? \_\_\_\_\_

If yes, please provide explanation: \_\_\_\_\_

How did you discover Auto Bank Floor Plan? \_\_\_\_\_

Auction References: \_\_\_\_\_ Phone #: \_\_\_\_\_ Year Registered: \_\_\_\_\_

Auction References: \_\_\_\_\_ Phone #: \_\_\_\_\_ Year Registered: \_\_\_\_\_

Other Floor Plan: \_\_\_\_\_ Other Floor Plan: \_\_\_\_\_

Auction Access #: \_\_\_\_\_ Dealer License #: \_\_\_\_\_

I hereby certify the information contained within this application and on any accompanying financial statements in true, complete and accurate. I authorize Auto Bank Floorplan to obtain credit information from a credit bureau and any financial institution trade creditor that I have provided as well as any other credit investigation that Auto Bank Floorplan deems necessary. I authorize Auto Bank Floorplan to contact any third persons and to disclose information, including information contained in this application for the purpose of among other things, obtaining inter creditor agreements and protecting Auto Bank Floorplan security interest.

Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Co-Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**PLEASE SUBMIT 6 MONTH BANK STATEMENTS WITH APPLICATION**