

USED CAR STORE APPLICATION



**(HEREINAFTER REFERRED TO AS AUCTION)
REGISTRATION AND CREDIT CLEARANCE FORM
4015 78TH AVENUE MILAN, IL 61264
DEALERS EXCHANGE**

**THANK YOU FOR YOUR INTEREST IN GREATER QUAD CITY AUTO AUCTION.
PLEASE PROVIDE US WITH THE FOLLOWING INFORMATION TO COMPLETE
YOUR APPLICATION.**

- ✓ **COPY OF CURRENT DEALER LICENSE**
- ✓ **COPY OF DRIVER LICENSE FOR EACH BUYER AND OWNER/CORPORATE OFFICER**-*(COPIES OF DRIVER'S LICENSE MUST BE CLEAR AND EITHER HAND DELIVERED OR MAILED. FAXED COPIES DO NOT PROVIDE A CLEAN PHOTO COPY OF PHOTOS.)*
- ✓ **COPY OF COMPANY CHECK**-*(PLEASE NOTE THAT WE ONLY ACCEPT COMPANY CHECKS. THE DEALERSHIP NAME MUST BE ON THE CHECK)*
- ✓ **COPY OF THE STATE TAX CERTIFICATE**-*(IF THE DEALERSHIP IS EXEMPT PLEASE PROVIDE THE FORM FROM THE STATE WHICH STATES SO.)*
- ✓ **OWNERS/CORPORATE OFFICERS SIGNATURES WHERE DESIGNATED** *(ALL OWNERS/CORPORATE OFFICERS MUST BE LISTED ON THE APPLICATION. IF ANY FUTURE DOCUMENTS ARE SIGNED BY SOMEONE NOT LISTED ON THE APPLICATION AS AN OWNER/CORPORATE OFFICER THE DOCUMENT IS INVALID.)*
- ✓ **FILL OUT ENCLOSED INFORMATION SHEET FOR EACH REPRESENTATIVE**- *(PLEASE NOTE THAT ONLY CORPORATE OFFICERS/OWNERS LISTED ON THE APPLICATION CAN AUTHORIZE REPRESENTATIVES TO BUY/SELL. IF YOU WOULD LIKE TO MAKE OTHER ARRANGEMENTS PLEASE CONTACT ME AND I WILL SEND YOU THE PROPER FORM.)*
- ✓ **BANK REFERENCE FEE IF NEEDED**-*(THE ONLY TIME YOU WILL BE REQUIRED TO PAY A FEE FOR A BANK REFERENCE IS IF YOUR BANK CHARGES US FOR A CREDIT REFERENCE.)*

THANK YOU FOR YOUR TIME. WE LOOK FORWARD TO DOING BUSINESS WITH YOU AND YOUR COMPANY! IF YOU HAVE ANY QUESTIONS, FEEL FREE TO CALL JESSICA AT: PHONE: 309-787-6300 OR BY FAX: 309-787-4862

Greater Quad City Auto Auction

OFFICE USE ONLY

(HEREINAFTER REFERRED TO AS AUCTION)

APPROVED _____

REGISTRATION AND CREDIT CLEARANCE FORM
4015 78th Avenue P.O. Box 409 Milan IL 61264

CREDIT RATE _____

OTHER _____

DATE OF APPLICATION: _____

Please complete and return registration forms by mail or fax (309) 787-4862. If you have any questions please call Dealer Registration (309)787-6300. Along with the completed forms please supply copies of:

A. DEALERS LICENSE

B. BUSINESS CHECK

C. STATE TAX CERTIFICATE

D. UPPER PORTION BUSINESS FEDERAL TAX RETURN

COMPANY NAME _____ IN BUSINESS SINCE _____

ADDRESS _____ P O BOX _____ CITY _____ STATE _____ ZIP _____

PHONE (____) _____ - _____ FAX (____) _____ - _____ EMAIL ADDRESS _____

TYPE OF DEALER: USED _____ WHOLESALE _____

IS DEALERSHIP: INDIVIDUAL _____ PARTNERSHIP _____ CORPORATION _____ LLC _____ LP _____

DEALER LICENSE # _____ DEALER PLATE # _____ STATE TAX # _____ FEDERAL IDENTIFICATION # _____

DO YOU OWN THE BUILDING YOU ARE DOING BUSINESS IN? YES OR NO. IF NO PLEASE COMPLETE THE FOLLOWING:

LANDLORDS NAME _____ PHONE () _____ - _____ ADDRESS _____ CITY _____ STATE _____

OTHER AUCTIONS YOU HAVE ATTENDED: _____

DEALERS WHOM YOU DO BUSINESS WITH: _____

PAY BY: CHECK _____ CASH _____ FLOORPLAN _____ IF FLOORPLAN, WHO IS FLOORPLANNER? _____

BANK NAME _____ BANK OFFICIAL _____ ACCT# _____

STREET _____ CITY _____ STATE _____ ZIP _____ PHONE () _____ - _____

PLEASE NOTE: WE DO NOT HONOR PERSONAL CHECKS. THE CHECKING ACCOUNT MUST BE IN THE NAME OF THE DEALERSHIP. WE ONLY ACCEPT ONE CHECKING ACCOUNT PER DEALERSHIP.

ONLY LIST BELOW ALL OWNERS, PARTNERS & CORPORATE OFFICERS:

NAME _____ NAME _____

SIGNATURE _____ SIGNATURE _____

ADDRESS _____ ADDRESS _____

CITY _____ STATE _____ ZIP _____ CITY _____ STATE _____ ZIP _____

TITLE _____ PHONE (____) _____ - _____ TITLE _____ PHONE (____) _____ - _____

SOCIAL SECURITY # _____ DOB _____ SOCIAL SECURITY # _____ DOB _____

NAME _____ NAME _____

SIGNATURE _____ SIGNATURE _____

ADDRESS _____ ADDRESS _____

CITY _____ STATE _____ ZIP _____ CITY _____ STATE _____ ZIP _____

TITLE _____ PHONE (____) _____ - _____ TITLE _____ PHONE (____) _____ - _____

SOCIAL SECURITY # _____ DOB _____ SOCIAL SECURITY # _____ DOB _____

The undersigned hereby acknowledge that all information provided in this application including the required documents is true, and authorizes Greater Quad City Auction to verify any representations, contact any named parties, and obtain consumer and business credit reports.

CORPORATE OFFICER OR OWNER SIGNATURE X _____

GREATER QUAD CITY AUTO AUCTION

4015 78TH AVE P.O. BOX 409

MILAN IL 61264

PHONE: (309) 787-6300 FAX: (309) 787-4862

TO: PATRONS OF GREATER QUAD CITY AUTO AUCTION
SUBJECT: AUTHORIZING & REMOVING BUYERS AND SELLERS
DATE: 03/01/02

When authorizing a buyer/seller you need to keep in mind the following information.

- 1. Individuals that are not authorized to buy/sell by a corporate officer/owner will not be allowed onto the lot or out in the auction arena.**
- 2. Individuals authorized as buyer/sellers will remain active for a minimum of 90 days. During this time, the dealership is responsible for all transactions/actions made by the authorized representative.**
- 3. After 90 days, the buyer/seller will remain active unless a Corporate Officer/Owner has given written notice to the Dealer Registration Department and the dealership will still be responsible for all transactions/actions made by the authorized representative.**
- 4. The Dealer Registration Department will not be responsible for removing representatives unless there is written notice from the Corporate Officer/Owner.**

If you have any further questions or concerns please feel free to let us know. Thank you for your time and enjoy the auction!

Attention: This form is valid and binding for a minimum of 90 days. After that time a removal form will be required to unauthorize any representative.

GREATER QUAD CITY AUTO AUCTION
(HEREAFTER REFERRED TO AS AUCTION)
4015 78TH AVENUE
MILAN, IL 61264
DEALERS EXCHANGE

Please supply copy of Driver's License.

COMPUTER# _____ DATE _____

NAME OF DEALERSHIP _____ TELEPHONE _____

ADDRESS _____ CITY _____ STATE _____ ZIP _____

AUTHORIZED REPRESENTATIVES

The following person or persons are duly authorized to buy and sell automobiles, to execute checks or drafts, to execute bills of sales, Odometer Mileage Statements, assignments of titles and warranties of titles on behalf of Dealer. The authority of the following persons to act on behalf of Dealer shall continue in full force and effect until terminated by Dealer in writing the Auction. Dealer does hereby guarantee all transactions made by such persons, and does indemnify and hold harmless the Auction from all loss or expense caused it as a result of any such transaction including losses from dishonored checks or drafts, defective titles, and false or inaccurate Odometer Mileage Statements as well as any expense incurred in attempting to collect such losses, including attorney's fees.

REPRESENTATIVE FULL NAME _____ SIGNATURE _____

HOME ADDRESS _____ CITY _____ STATE _____ ZIP _____

HOME PHONE _____ EMAIL _____ DOB _____

SOCIAL SECURITY # _____ DRIVER'S LICENSE # _____ STATE _____

The undersigned hereby acknowledge that all information provided is true and authorized Greater Quad City Auto Auction to verify any representations.

CORPORATE OFFICER OR OWNER SIGNATURE x _____

GUARANTY

In consideration of Auction allowing Dealer to buy and sell motor vehicles through Auction, the undersigned, whether one or more, personally covenant guarantee and warrant that the title to each vehicle sold by Dealer through Auction will be good and will be free and clear of all liens and encumbrances, whatsoever. The undersigned unconditionally agrees to reimburse Auction for any loss, damage, expense, or costs, including attorney's fees, incurred by Auction as a result of breach of the foregoing warranty of title as to any such motor vehicle.

The undersigned further guarantees full payment of any debts of Dealer to Auction, including any checks or drafts issued by Dealer or any of Dealer's representatives, together with any loss or expense incurred by Auction in collecting or attempting to collect such debt, including attorney's fees.

The undersigned acknowledges the Auction shall have the right to refuse to transact business with Dealer, to modify or release any and all collateral security, to extend or change time of payment and to settle or compromise with Dealer without notice to the undersigned and without discharging or affecting the liability of the undersigned hereunder. This guaranty is to be a continuing guaranty and the undersigned hereby waives notice of acceptance of this guaranty and presentment, demand, protest, and any notice of non-payment or dishonor. The undersigned shall be liable as principal debtor and not merely as surety, and the bankruptcy or any assignment in favor of Creditors of Dealer shall not affect the enforceability of this agreement.

This instrument shall bind the respective heirs, executors, administrators, and assigns of the undersigned, and shall ensure to the benefit of Auction, its successors, assigns, and subrogess.

Where there is more than one signatory to this agreement each signatory shall be jointly and severally liable under this agreement.

IN WITNESS WHEREOF the undersigned have hereunto set their hands and seals this _____ day of _____, 20____.

CORPORATE OFFICER OR OWNER SIGNATURE x _____