

Dealers' Choice Auto Auction Dealer's Application

Thank you for your interest in Dealers' Choice Auto Auction (DCAA). We are a single lane auto auction live every Monday at 11:30 AM.

In order to finalize the registration process a completed dealer registration packet must be on file. Along with this packet we will need current copies of the following:

Dealers/Occupational License
Articles of Incorporation
Seller's Permit
Surety Bond
Business License
Driver's License
Sales License

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Please fax the completed forms and mentioned documents to (562) 424-9481.

Should you have any question or concerns please do not hesitate to contact us directly.

Carmen Rojas
562-424-9490
Carmen@dcautoauction.net

Priscilla Carey
714-342-2813

Tiffany Chau
562-587-3787

DEALERS' CHOICE AUTO AUCTION
2875 Junipero Avenue, Signal Hill, CA. 90755
Phone: (562) 424-9490 Fax: (562) 424-9481
www.dcautoauction.net Dealer Registration Packet

Dealer Registration Packet

Dealers' Choice Auto Auction Dealer's Application

BUSINESS INFORMATION

Business Name: _____

DBA (If applicable): _____

Business Type: _____ Individual _____ Partnership _____ Limited Liability _____ Corporation

Dealer Type: _____ Franchised Dealership _____ Used _____ Wholesale Only

Business Address: _____

Business Phone: _____

Business Fax: _____

Email Address: _____

Dealer License # _____

FEI# (TIN): _____

State Sales Tax #: _____

Business Establishment Date: _____

What type of an account would you like to setup: _____ Seller Only _____ Buyer Only _____ Both

What payment type will you use: _____ Cashier's Check _____ Company Check _____ Floor Plan

Owner/Officer Information:

(1)

Name: _____

Title: _____

Home Address: _____

Home Number: _____

Cellular Number: _____

Social Security # _____

Driver's License/Occupational License # _____

(2)

Name: _____

Title: _____

Home Address: _____

Home Number: _____

Cellular Number: _____

Social Security # _____

Driver's License/Occupational License # _____

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POWER OF ATTORNEY

I, _____
of _____
(Print Name) (Company Name)

By signing below, under penalties of perjury, I certify that the information provided is binding, true and accurate. I do certify that I am a U.S. Citizen or other U.S. person. This endorsement also appoints Dealers' Choice Auto Auction and their representatives as my attorney in fact to complete all necessary documents, as needed, to transfer ownership of any vehicle as required by law.

Signature: _____

Position: _____ Date: _____

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INDUSTRY REFERENCE FORM

Industry Reference:

Other Auctions you've attended: _____ Registered Since (year):

Other Auctions you've attended: _____ Registered Since (year):

Other Auctions you've attended: _____ Registered Since (year):

Credit Reference:

(1)

Lender Name: _____

Phone Number: _____

Address: _____

Fax Number: _____

Account Numbers: _____

Name of Account Manager: _____

Years w/ account: _____

(2)

Lender Name: _____

Phone Number: _____

Address: _____

Fax Number: _____

Account Numbers: _____

Name of Account Manager: _____

Years w/ account: _____

I authorize Dealers' Choice Auto Auction and its insurers to research the credit history of the Dealership and any of the Dealership's owners and officers through banks, financial institutions, credit reporting agencies and other sources. By signing below I give Dealers' Choice Auto Auction full authorization to verify the references above to its full extent.

Signature: _____

Date: _____

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BANK REFERENCE FORM

The following section must be completed by dealer:

Business Name: _____

Business Address: _____

Business Start Date: _____

I authorize Dealers' Choice Auto Auction and its representatives the release of the information requested below concerning my account. The undersigned authorizes the "Bank" to release information to Dealers' Choice Auto Auction.

Signature: _____

Date: _____

Owner/Officer/Partner Signature

The following section must be completed by the "bank."

Bank Name: _____

Bank Phone # _____

Address: _____

Bank Fax # _____

Bank Rep Name _____

Business Account # _____

Date Opened: _____

Business Checking Account # _____

Average Balance (\$): _____ (6 Month Balance)

NSF in the past 12 months? _____ Yes _____ No If yes, how many? _____

For additional accounts please make photocopies of this page.

Bank Representative Information

Bank Stamp Here

Name: _____

Signature: _____

Title: _____

Date: _____

Phone # _____

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ADDITION/REMOVAL OF DEALERS' AUTHORIZED AGENT FORM

(1)

Dealership Name:

Agents Full Name:

Phone Number: _____

Cell Number: _____

Address: _____

Are you a U.S. citizen? _____

Occupational/Sales License # _____

Email Address: _____ Social Security # _____

Authorized to: _____ Buy Cars _____ Sell Cars _____ Sign Checks (Check all that apply)

Authorized Agents Signature: _____

Owner/Officer Signature: _____

REMOVE THIS AUTHORIZED AGENT | SIGNATURE/DATE:

(2)

Dealership Name: _____

Agents Full Name: _____

Phone Number: _____

Cell Number: _____

Address: _____

Are you a U.S. citizen? _____

Occupational/Sales License # _____

Email Address: _____

Social Security # _____

Authorized to: _____ Buy Cars _____ Sell Cars _____ Sign Checks (Check all that apply)

Authorized Agents Signature:

Owner/Officer Signature:

REMOVE THIS AUTHORIZED AGENT | SIGNATURE/DATE:

Dealer Registration Packet