



"Always Exceeding Expectations"

2870 Electronics Dr
Melbourne, Florida 32935

Office: 321-242-1833
Fax: 321-242-6080

www.SpaceCoastAutoAuction.com

Weekly Auction
Tuesday at 6 pm

Rain or Shine
Three Lanes of
Exciting Action

Dealer's Application Checklist

Page 1 of 1

Thank you for registering with our auction. Please include the following paperwork needed to complete your dealer file:

- _____ A copy of your current dealer license.
- _____ A copy of your current dealer bond.
- _____ A copy of your sales tax certificate.
- _____ A copy of your company check.
- _____ A copy of the driver licenses for all owners and representatives.
- _____ The corporate seal of notary if you are not a corporation on the dealer's application.
- _____ Completed Dealer's Representative / Proxy Assignment Form
- _____ Completed Dealer's Company and Banking Information Form
- _____ Completed Dealer's Guarantee Form
- _____ Completed Dealer's Power of Attorney Form
- _____ Completed Dealer's Bank Account Verification Form
- _____ Completed Dealer's Bank Account Information Release Form

Thanks again and please do not hesitate to call with any questions.



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Dealer and Banking Information

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Dealer Information

		Date	Bidder ID Number
Company Name		Dealer's Phone	
Address		Dealer's Fax	
City	State	Zip	
Business Email		Dealer is Individual, Partnership, or Corporation	

Bank Information

Bank Name	Bank's Phone
Bank's Address, City, State, and Zip	

Request purchase status to be:

Cash Only

Finance

Checks (Subject to Auction Approval)

Other Auction Sites with Whom Our Company is Registered:

Auction Site Name	City, State	How Long
Auction Site Name	City, State	How Long
Auction Site Name	City, State	How Long
Auction Site Name	City, State	How Long



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Dealer and Banking Information Page 2 of 2

Owners and Officers

Name	Title / Position	Home Phone
Home Address, City, State, and Zip		Cell Phone
Social Security Number <small>(Required - treated under the US Gov't Privacy Act of 1974)</small>	Email Address	

Name	Title / Position	Home Phone
Home Address, City, State, and Zip		Cell Phone
Social Security Number <small>(Required - treated under the US Gov't Privacy Act of 1974)</small>	Email Address	

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Dealer's Representative / Proxy Assignment Form Page 1 of 2

Company Name Date

Address

City State Zip

I hereby authorize the following person(s) to transact business on behalf of my company at your auction. I assume full responsibility for all business they conduct.

Additional Representatives are listed on the next page(s).

_____ First Representative's Name	_____ Home Phone	_____ Cell Phone
_____ Home Address, City, State, and Zip		
_____ Social Security Number <small>(Required - treated under the US Gov't Privacy Act of 1974)</small>	_____ Email Address	
_____ Representative's Signature	_____ Driver's License Number	

I agree to notify you immediately in writing by registered mail of any changes in the above and to return to you the auction identification plates issued to the above. Until ID plates are returned to auction, I will be responsible for all sales and purchases made with these ID Plates.

Company Owner's Name Company Owner's Signature

Subscribed and sworn before me, this _____ day of _____, _____,
a notary public in and for _____ County, State of _____.

Notary Public's Signature

Notary Public Stamp / Seal

