

C#: \_\_\_\_\_

Paducah Auto Auction, Inc.  
2600 John L. Puryear Dr.  
Paducah KY 42003

Phone: (270) 442-9197

Fax: (270) 442-9493

Firm Name: \_\_\_\_\_

Owner's Name: \_\_\_\_\_

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

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

Bus. Phone \_\_\_\_\_ Fax number \_\_\_\_\_

Representatives: 1 Phone #: \_\_\_\_\_

2 Phone #: \_\_\_\_\_

3 Phone #: \_\_\_\_\_

4 Phone #: \_\_\_\_\_

Email Address: \_\_\_\_\_

Type Agency: Used \_\_\_\_\_ Wholesale \_\_\_\_\_ New \_\_\_\_\_

If new what makes: \_\_\_\_\_

Dealer Number: \_\_\_\_\_ Years in Business: \_\_\_\_\_

Tax Number: \_\_\_\_\_ Soc. Sec. Number: \_\_\_\_\_

Bank or Finance Co: \_\_\_\_\_

Account #: \_\_\_\_\_ Bank Phone: \_\_\_\_\_

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

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

Name of officer: \_\_\_\_\_

Payment Preferences: Cash \_\_\_\_\_ Check \_\_\_\_\_ Draft \_\_\_\_\_

References: (Preferably Auctions you are registered with)

BY SIGNING THIS FORM, YOU AND YOUR AGENTS AGREE TO ABIDE BY THE  
RULES AND POLICIES OF PADUCAH AUTO AUCTION, INC.

BL: \_\_\_\_\_

BC: \_\_\_\_\_

LC: \_\_\_\_\_

Owner's Signature

C#:\_\_\_\_\_

Paducah Auto Auction, Inc.  
2600 John L. Puryear Dr.  
Paducah KY 42003

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

Dealer Name: \_\_\_\_\_

Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Phone Number: \_\_\_\_\_ Zip \_\_\_\_\_

Gentlemen:

I hereby authorize you to release the necessary credit information to this auction to enable us to do business there with our business checking account.

Account number: \_\_\_\_\_

Your prompt attention in answering their attached letter will be greatly appreciated.

Sincerely,

Title: \_\_\_\_\_

FOR DEALERS ONLY!