



Dealer Application

DealerTrack Y / N

Legal Name	[] Franchise [] Non-Franchise
DBA	Federal Tax ID Number
Business Address / City / State / Zip Code	Resale License Number
Business Type (choose one) [] Sole Proprietorship [] Partnership [] Corporation [] LLC	Business Phone Number
Time at Current Location	Finance Office Fax Number
Dealership Email Address	ACH Fax Notification Number
Brands Sold	Additional Dealership Locations (Address / City / State / Zip Code)

Principal(s) Information	Title	SSN	Home Address	Birth date	% Owned

Contact Information

General Manager	Phone	Email Address
Finance Manager	Phone	Email Address
Sales Manager	Phone	Email Address
DMV/Title Contact	Phone	Email Address

Other Experience and Positions Held in Automotive Industry (Work history on all principals and General managers required for non-franchise dealers if less than 5 years in business)

Company Name	Position	Length of Time

AGREEMENT

The above named Dealer certifies that all of the information provided on this application is true and correct. Dealer also agrees that Greater Access Financial, LLC or any of its subsidiaries and affiliates, may fax unsolicited advertisements to Dealer at the fax numbers provided in the application, or any other fax numbers Dealer may give to Greater Access.

Name: _____ Title: _____

Signature: _____ Date: _____

I also authorize Greater Access to investigate my personal credit and employment history and obtain credit reports, as necessary.

Signature: _____ Date: _____ Signature: _____ Date: _____
 Signature: _____ Date: _____ Signature: _____ Date: _____



Dealer Reference Sheet

DEALER NAME: _____

BANK REFERENCES

1. _____
Bank Name Address Phone Years Used
2. _____
Bank Name Address Phone Years Used
3. _____
Bank Name Address Phone Years Used

PERSONAL REFERENCES

1. _____
Name Address Phone Years Known
2. _____
Name Address Phone Years Known
3. _____
Name Address Phone Years Known