

## WHOLESALE AUTO DEALER SUPPLEMENT

Applicant's Name: \_\_\_\_\_

1. Do you sell autos to the public?  Yes  No

If yes, explain: \_\_\_\_\_

2. Do you operate out of a residence?  Yes  No

a) If yes, do you have a Homeowner's Liability Insurance Policy?  Yes  No

3. Is the scheduled location within 100 miles of your residence?  Yes  No

4. Where do you purchase vehicles held for sale? (List from most frequent to least)

City & State: \_\_\_\_\_ City & State: \_\_\_\_\_

City & State: \_\_\_\_\_ City & State: \_\_\_\_\_

5. List any additional states where you conduct operations: \_\_\_\_\_

6. Do you loan or sell dealer plates?  Yes  No

7. Do you or any of your drivers have out of state driver's licenses?  Yes  No

If yes, explain: \_\_\_\_\_

8. Do you **always** take physical possession of vehicles you purchase?  Yes  No

9. Where are autos stored?  Scheduled location  Auction  Other dealer lots  Other \_\_\_\_\_

If at Auction:

a) Do you have a designated portion of the lot at the auction for storing your autos?  Yes  No

b) Approximately how often are autos stored at auction? \_\_\_\_\_

10. Do you import autos?  Yes  No If yes, is a US distributor utilized?  Yes  No

11. Method of transporting autos (must total 100%)

Owners/Employees	%
Contract Drivers	
a) How often are they used? _____ times per <input type="checkbox"/> week <input type="checkbox"/> month <input type="checkbox"/> year	%
b) Do you <input type="checkbox"/> use different drivers each time <input type="checkbox"/> use the same drivers consistently	
Customer arranges transport through third party	%
You arrange transport through third party	%
Other:	%
<b>TOTAL</b>	<b>100%</b>

\_\_\_\_\_  
**Applicant Signature**

\_\_\_\_\_  
**Date**