

WHOLESALE DEALER SUPPLEMENT

Applicant Name: _____

1. Do you sell autos to the public? Yes No
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: _____ N/A
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) Are autos kept in a secure location, with no access to unauthorized individuals Yes No
 - b) Approximately how often are autos stored? Less than a week at a time More than a week at a time
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:	%
TOTAL	100%

Applicant's Signature

Date