

DEALER APPLICATION  
for

# CENTRAL PA AUTO AUCTION, INC.

Please return the following  
with applications:

Copy of Dealer Lot License  
Copy of Dealer Salesman License  
Copy of Checks

Exit 178 Interstate 80  
P.O. Box 41 Lock Haven PA 17745  
TOLL FREE 800-248-8026 or 570-726-4300  
FAX 570-726-7841

Business Name: \_\_\_\_\_ Email Address: \_\_\_\_\_

Address: STREET \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

Bus. Phone ( ) \_\_\_\_\_ PA Dealer I.D.# 85- \_\_\_\_\_ 86- \_\_\_\_\_ Other State Dealer I.D.# \_\_\_\_\_

Owner's Name: 1. \_\_\_\_\_ 2. \_\_\_\_\_

Owner's Address: \_\_\_\_\_

Soc. Sec. # \_\_\_\_\_ Ph. \_\_\_\_\_ Soc. Sec. # \_\_\_\_\_ Ph. \_\_\_\_\_

Driver's Lic.# \_\_\_\_\_ Driver's Lic. # \_\_\_\_\_

Bank \_\_\_\_\_ Acct. # \_\_\_\_\_ Ph. \_\_\_\_\_

Address: STREET \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

I desire to pay with CASH ( ) CHECK ( ) BOTH ( )  
Please List Other Auctions Where Your Business Is Registered

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

How did you find out about our auction? \_\_\_\_\_  
Authorized Buyers and Sellers (PRINT & SIGN)

- |          |           |                  |
|----------|-----------|------------------|
| 1. PRINT | SIGNATURE | SALESMAN'S LIC # |
| 2. PRINT | SIGNATURE | SALESMAN'S LIC # |
| 3. PRINT | SIGNATURE | SALESMAN'S LIC # |
| 4. PRINT | SIGNATURE | SALESMAN'S LIC # |

I do hereby authorize the above named bank to release credit information regarding my accounts,  
to Central PA Auto Auction, Inc.

\_\_\_\_\_  
OWNER OR OFFICER SIGNATURE

## BANK USE ONLY

Yrs. Experience with Above Dealer \_\_\_\_\_

Has Floor Plan ( ) Other \_\_\_\_\_ Neither ( ) \_\_\_\_\_

Average Balance yr. to date \_\_\_\_\_

Your Rating or Comment \_\_\_\_\_

\_\_\_\_\_  
BANK OFFICIAL SIGNATURE

## AUCTION USE

Date Applied \_\_\_\_\_ Code \_\_\_\_\_ Date Approved \_\_\_\_\_ Comment: \_\_\_\_\_

Perm. # \_\_\_\_\_ By \_\_\_\_\_