

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!