



2728 S.W. 25th
Oklahoma City, OK 73108
Phone (405) 680-8660 Fax (405) 680-9020
www.okaex.com

Thank you for inquiring about registering with the Oklahoma Auto Exchange. In order to complete the process, we will need the following:

1. Completed application
2. Photo copy of a *voided* business check
3. Photo copy of your dealer's license
4. Photo copy of your driver's license
5. Photo copy of salesman license for all reps.

Please fax this information back to us or bring it with you to get registered at the Oklahoma Auto Exchange. Our dealer cards will have your picture, so please allow time to get your picture taken.



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Dealer Registration Form

Date: _____

Dealership Name: _____ Telephone: _____

Business Tax ID# (9 digits): _____ Fax: _____

Physical Address: _____

City: _____ State: _____ Zip: _____

Email: _____

ADDRESS TO MAIL TITLES IF DIFFERENT FROM ABOVE

Address: _____ City: _____

State: _____ Zip: _____

Business Information:

Is the Dealer, Person: _____ Partnership: _____ Corporation: _____

List of Owners and Representatives:

Name: _____ Title: _____ SS# _____

Home Address: _____ Cell #: _____ DOB: _____

City: _____ State: _____ Zip: _____ US Citizen?: _____

Email: _____ Cell Provider: _____

Name: _____ Title: _____ SS# _____

Home Address: _____ Cell #: _____ DOB: _____

City: _____ State: _____ Zip: _____ US Citizen?: _____

Email: _____ Cell Provider: _____

Name: _____ Title: _____ SS# _____

Home Address: _____ Cell #: _____ DOB: _____

City: _____ State: _____ Zip: _____ US Citizen?: _____

Email: _____ Cell Provider: _____

Dealer Organized on: _____ Dealers License # _____ Issue Date _____

Do you expect to: Buy _____ Sell _____ Both _____

If you expect to buy, do you prefer to use: Cash _____ Check _____

Floorplan _____ Account # _____

(checks subject to auction approval)

If franchised, what make of car sold? _____

The Oklahoma Auto Exchange is authorized to investigate the credit history of Dealer and any Dealer's Owners and Representatives through banks, financial institutions, credit reporting agencies and other sources: Yes _____ No _____

Auction References:

Name of Auction: _____ State: _____ Phone: _____

Name of Auction: _____ State: _____ Phone: _____

Name of Auction: _____ State: _____ Phone: _____

Name of Auction: _____ State: _____ Phone: _____

Bank References:

Name of Bank: _____ Account Number: _____

Address: _____ City: _____ State: _____

Phone: _____ Bank Officer: _____

Zip: _____

Name of Bank: _____ Account Number: _____

Address: _____ City: _____ State: _____

Phone: _____ Bank Officer: _____

Zip: _____

By signing on the line below you agree to follow all auction policies and regulations.

Print Name: _____

Signature: _____

Date: _____