



MANHEIM FINANCIAL SERVICES

Business/Dealer Information

Company Legal Name: (if DBA, list full company name and DBA Name)

- Corporation Partnership Rental
 Sole Proprietorship Retailer
 Wholesaler LLC

Federal ID# _____

Sales Tax# _____

Years in Car Business _____

Years at Current Dealership _____

Dealership Address

Street Address _____

County _____

City _____ State _____ Zip _____

Phone _____ Fax _____

Email _____

Years at Location _____

Additional Locations _____

FOLD

Business / Owner Information

Officer/Owner Name _____

Social Security # _____ - _____ - _____

Date of Birth _____

D.L. # _____ State _____

Title _____ % of Ownership _____

Home Address _____

City _____ State _____ Zip _____

Home Phone _____

Cell Phone _____

Years there _____ Own Rent

Have you declared business or personal bankruptcy in the past? YES NO

Are you a U.S. citizen? YES NO

Bank Auction _____

Amount Requested \$ _____

Universal Dealer # _____

Applicant warrants that the information provided in the application is true to the best of his or her knowledge and acknowledges that this loan request does not constitute a commitment by Manheim Automotive Financial Services, Inc. (MAFS). Applicant further understands that MAFS may approve or reject this application, and loan to Borrower such amount, if any and upon such terms and conditions as MAFS shall determine. The business and undersigned individual(s) each authorize MAFS, Manheim, and/or affiliates to inquire from the business's and undersigned individual(s)'s bank, trade references, credit reporting agencies, or any other sources available, information concerning business's and undersigned individual(s)'s financial condition and paying habits. Applicant accepts full responsibility for transactions completed by all authorized buyers on his/her MAFS ID card.

FOLD

Officer/Owner Name _____

Social Security # _____ - _____ - _____

Date of Birth _____

D.L. # _____ State _____

Title _____ % of Ownership _____

Home Address _____

City _____ State _____ Zip _____

Home Phone _____

Cell Phone _____

Years there _____ Own Rent

Have you declared business or personal bankruptcy in the past? YES NO

Are you a U.S. citizen? YES NO

Auction References

1. Name _____

Phone _____

2. Name _____

Phone _____

3. Name _____

Phone _____

4. Name _____

Phone _____

FOLD

Other Floor Plan Sources

1. Name _____

Phone Number _____

Line of Credit \$ _____

2. Name _____

Phone Number _____

Line of Credit \$ _____

Names of Authorized Buyers at Auctions

1. Name _____

SS# _____ D.L.# _____

Phone # _____ Cell # _____

2. Name _____

SS# _____ D.L.# _____

Phone # _____ Cell # _____

3. Name _____

SS# _____ D.L.# _____

Phone # _____ Cell # _____

MAFS Products

Please check the box next to the MAFS Product to apply.

- 45 Special Floor Plan Big Truck Program
 GOLD Card Floor Plan Receivables Funding
 Rental Financing Insurance Services
 RV Program

Owner #1 _____

Signature _____

Date _____

Owner #2 _____

Signature _____

Date _____

FOLD

FOLD

FOLD

K

