



**P.O. Box 3107, Sioux City, IA 51102 Ph: 844-283-7483**  
**www.udriveac.com Fax: 712-224-5165**

**Dealer Profile**

Legal Name (under which tax returns are filed) and DBA				Federal Tax ID #	
Physical Address			City	State	Zip
Dealer Contact Name		Dealer Email Address		Dealer Website Address	
Dealership Phone #	Credit Decision Fax Back #	CA-Tax Seller#	Dealer Track ID #	Route One ID#	

<input type="checkbox"/> Corporation <input type="checkbox"/> LLC <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietorship	Years Started	Total Years in Business	In House Financing		If yes, please list dollar amount of	Number of portfolio accounts
			Yes	No		
				<input type="checkbox"/>	<input type="checkbox"/>	

	Avg Monthly Sales	Inventory Level	Range of Inventory in Years	Part of Dealer Group		If yes, Name of Group	% Owned by Group
New Vehicles				Yes	No		
Used Cars				<input type="checkbox"/>	<input type="checkbox"/>		
Competing Lenders currently active at dealership:							
Ancillary products currently offered (GAP, Warranties, etc.):							

Dealership Key Personnel	Name	Phone	Email
Owner/Dealer Principal			
General Manager			
Used Car Manager			
F & I Manager			
Controller			

**Confidentiality Notice:** This document is intended solely for the addressee(s) named herein and may contain privileged or confidential information. If you have received this document in error, please notify the sender immediately. You are hereby notified that any dissemination, distribution, or copying of this document and/or any attachments thereto, is strictly prohibited. Rev:Feb. 2017



### Dealer Profile (Continued)

For Corporation or LLC, please include info for ALL officers/members. For Partnerships of Proprietorship, please include info for ALL Principals. If more space is needed, please attach information on an Additional Page. Thank you.

Name of Officer/Member/Principal	Residence Address	City	State	Zip
1)				
Title/Ownership %:	SSN:	DOB:	Phone No:	
2)				
Title/Ownership %:	SSN:	DOB:	Phone No:	
3)				
Title/Ownership %:	SSN:	DOB:	Phone No:	

	Bank Reference Name	Address	City	State	Zip
1					
	Account Number:	Contact Name:		Phone No:	
2					
	Account Number:	Contact Name:		Phone No:	

	Auction Floor Plan Name	Address	City	State	Zip
1					
	Account Number:	Contact Name:		Phone No:	
2					
	Account Number:	Contact Name:		Phone No:	
3					
	Account Number:	Contact Name:		Phone No:	

Questions apply to all Officers/Members/Principals Listed Above.	Yes	No	If yes, please specify owner(s), officers(s) and or Principals(s)
1 Filed or declared personal or business bankruptcy?			
2 Outstanding judgments or non-tax liens?			
3 Contested income or other tax liens?			
4 Do you have any threatened, pending or current litigation against you?			
5 Ever been convicted of a felony?			
6 Have had a motor vehicle dealer's or salesperson's license subject to denial of disciplinary actions?			

The undersigned acknowledges and understands that U Drive Acceptance Corp ("UDAC") is relying on the information provided herein to decide whether to engage in the purchase of retail installment contracts with the Dealership. The undersigned certifies that the information provided herein is true and correct. The undersigned authorizes all inquiries deemed necessary by UDAC, including credit bureau inquiries, criminal history reports or any other background information necessary in connections with the processing of this application, to verify the accuracy of this information and determine the financial fitness of the applicant. The undersigned authorizes UDAC to obtain a consumer credit report in connection with this application, for any aspect of the business relationship arising from this application, or for any other permissible purpose under the Federal Fair Credit Reporting Act.

Date: \_\_\_\_\_ Signature: \_\_\_\_\_ Title: \_\_\_\_\_

**Confidentiality Notice:** This document is intended solely for the addressee(s) named herein and may contain privileged or confidential information. If you have received this document in error, please notify the sender immediately. You are hereby notified that any dissemination, distribution, or copying of this document and/or any attachments thereto, is strictly prohibited. Rev:Feb. 2017