

DEALER INFORMATION

BUSINESS NAME
DBA
IN BUSINESS SINCE

BUSINESS ADDRESS
CITY, STATE ZIP CODE
PHONE NUMBER

SURETY BOND CO
AGENT NAME
PHONE NUMBER

<input type="radio"/> SOLE PROPRIETORSHIP	<input type="radio"/> PARTNERSHIP
<input type="radio"/> CORPORATION	<input type="radio"/> LLC

PRINCIPAL
STREET ADDRESS
CITY, STATE ZIP
SOCIAL SECURITY NUMBER
HOME PHONE NUMBER

PRINCIPAL
STREET ADDRESS
CITY, STATE ZIP
SOCIAL SECURITY NUMBER
HOME PHONE NUMBER

HOW MANY TRUCKS DOES YOUR DEALERSHIP SELL A MONTH?
--

Please attach a copy of your DBA and surety bond

DEALER SIGNATURE CARD

The undersigned, principal of _____ (business name), a _____ (type of business), hereby certifies that the following are names and signature of person/s authorized to assign installment sales contracts to Allstate Finance

NAME	SIGNATURE
NAME _____	SIGNATURE _____
NAME _____	SIGNATURE _____
NAME _____	SIGNATURE _____
NAME _____	SIGNATURE _____
NAME _____	SIGNATURE _____

THE UNDERSIGNED HEREBY DECLARES THAT THE ABOVE IS TRUE

NAME _____	TITLE _____
SIGNATURE _____	DATE _____