

GREATER ROCKFORD AUTO AUCTION & AUCTION ACCESS REGISTRATION APPLICATION

Attached is a registration application for Greater Rockford Auto Auction/AuctionAccess. The complete packet includes the following:

- REGISTRATION APPLICATION (2 PAGES)
- BANK AUTHORIZATION LETTER
- DEALER LICENSING INFORMATION
- DEALERSHIP CREDIT INFORMATION
- DEALER AUTHORIZATION OF AN INDIVIDUAL (DEALERSHIP TO COMPLETE ONE FORM FOR EACH AUTHORIZED BUYER)
- INDIVIDUAL AUTHORIZATION LETTER (EACH INDIVIDUAL TO BE ADDED AS A BUYER TO COMPLETE ONE FORM)
- REMOVAL OF AN INDIVIDUAL (DEALERSHIP TO COMPLETE ONE FORM FOR EACH PERSON TO BE REMOVED)
- W-9 REQUEST FOR TAXPAYER IDENTIFICATION NUMBER AND CERTIFICATION
- GUARANTY
- MAILING PREFERENCES AND DEALER REPRESENTATION AUTHORIZATION
- COMMUNICATION PREFERENCE
- INTERNET BIDDER REGISTRATION/AGREEMENT

In addition to the above forms, please include a copy of your current Dealers License(s), your state sales tax certificate and a voided copy of your business check.

PLEASE RETURN THE COMPLETED FORMS TO GREATER ROCKFORD AUTO AUCTION VIA:

FAX: 815-874-3389

USPS: 5937 SANDY HOLLOW RD., ROCKFORD, IL 61109

EMAIL: PATCHISON@GRAA.NET

OR BRING DIRECTLY TO GRAA DEALER REGISTRATION

CALL PAM ATCHISON WITH DEALER REGISTRATION FOR ANY QUESTIONS at 815-874-7800.



Registration Application

Dealership Information				De	ealership A	uctionACCES	SS ID:	
Trade or DBA Name:								
Legal Name (if different):					Date Busir	ness Started:	:	
Federal ID:								
(US-EIN, M	IX-RFC, CA-GS	ST/BIN, Interna	ational-Owr	ers Passport)				
RIN (Canadian Province of Ontario on	ly):							
Check only one Sole Proprie	etorship	Ger	neral Parti	nership	Li	mited Partne	ership	
Company Type: Business Co	orporation	Lim	nited Liabi	lity Company	U	nlimited Liab	ility Corpora	ation
Business Types								
Check all that apply	New	Used	Lease	Wholesale	Parts	Salvage	Export	Rental
Automobile								
Motorcycle								
Moped								
RV								
Mobile Home								
Trailer (Pull Behind)								
Motorcycle (Off Road)								
ATV								
Snowmobile								
Heavy Equipment								
Boat								
Personal Watercraft								
Airplane								
Unknown								
Contact Information								
Lot Address:								
City:				Colony (if applic	able):			
St/Prov (if applicable):		Postal Cod	de:	Co	untry:			
Mailing Address:								
City:			(Colony (if applic	ahle).			
St/Prov (if applicable):		Postal Cod			untry:			
Bus. Phone Number:				Fax Number:	——			
Email Address:			- Website	_				

You, the undersigned entity and individuals, hereby authorize AutoTec, LLC, its affiliate Auction Insurance Agency("AIA"), and those customers that subscribe to AutoTec's AuctionACCESS system (including Manheim, Inc. and its affiliates, ADESA, Inc. and its affiliates, and all other subscribing auctions) (collectively, "Customers") to provide, obtain, store, use, and share amongst themselves, and externally, as each sees fit, the information contained on this application, on any other forms provided to AutoTec, and other information regarding you and/or your dealings with each, including transaction, bank, and credit information and consumer reports. You acknowledge that AutoTec provides such information to Customers without verifying the same, on an "as is" basis, expressly disclaiming any express or implied warranties regarding such information. Customers are not limited to businesses in the automobile auction or dealer industries, but may also include other businesses providing goods or services to such industries.

By signing below, you (1) agree to the terms of this application, any exhibits hereto, and AutoTec's Terms and Conditions as they may be amended from time to time and posted on www.AuctionACCESS.com, (2) warrant that you are solvent, properly registered to do business and licensed as a dealer (if applicable), and that the information provided herein is complete, accurate, and truthful, (3) acknowledge that registration in the AuctionACCESS System is no guarantee of purchasing privileges or credit with any Customer, which each retain the discretion to deal with you as they see fit, (4) agree to be bound by the policies and procedures of each Customer at which you register or transact with your AuctionACCESS credentials, (5) agree that AutoTec, AIA, and each Customer, on their own behalf or on behalf of their respective customers and business partners may contact you for any commercial or advertising purpose using the telephone numbers (whether business, home, or mobile numbers), fax numbers, e-mail addresses, and/or other contact information provided on this form, or otherwise used in connection with your business, and (6) agree to disclose AuctionACCESS numbers only to AutoTec Customers.

You agree that these terms and any other commitments or account forms submitted to AutoTec, its affiliates, and any Customers, by you or any authorized Individual, shall have the same force and effect as though personally signed by each of you and may be enforced as originals, even if they were accepted online, by email, via "click-through" agreement, or in other digital, pdf, or facsimile format.

Signature

Legal Name of Entity (Corp/LLC,	/LLP/ULC/Partnership/Individual)	Trade or DBA Name of Entity Its:						
By:								
Printed Name of Authorized Sign	er (Owner/Officer/Manager)	Title of Authorized Signer (Owner/Officer/Manager)						
Signature of Authorized Signer (C	Owner/Officer/Manager)	Date of Signature						
Owners								
Owner Name	Owners AA ID	Owner Name		Owners AA ID				
References								
Auction Name			Phone Number					
Franchise Informatio	on							
Franchise Name	Franchise Number	Franchise Name		Franchise Number				



Bank Authorization Letter

To Whom It May Concern:

In order to enable the undersigned dealership to participate in AutoTec's AuctionACCESS System and thereby enhance its automotive business and ability to utilize bank accounts in connection with the same, you are hereby authorized to do the following:

- ◆ Release financial credit information, including account statements and credit reports, to AutoTec, LLC, its affiliate Auction Insurance Agency, and those customers that subscribe to AutoTec's AuctionACCESS System (including Manheim, Inc. and its affiliates, ADESA, Inc. and its affiliates, and all other subscribing auctions and customers) ("Customers").
- ◆ Include the information contained in the attached Bank Reference Letter regarding the undersigned dealership and its business checking and other accounts as requested by the AuctionACCESS Customer, AutoTec, LLC, and/or Auction Insurance Agency.
- ◆ Share this information with the AuctionACCESS Customers with whom I wish to register.

The information will be used for business purposes in connection with the AuctionACCESS System and/or affiliated programs provided for subscribing Customers. We have agreed that our online or digital signature to this and other forms is binding as if personally signed. Thus, you may rely on any system generated acknowledgment stamp with IP address below.

Dealership AuctionACCESS ID:	
Dealership Name:	
Dealership Address:	
_	
Your prompt attention in answering the	he Bank Reference Letter will be greatly appreciated.
	Sincerely,
By:	
	Printed Name of Authorized Signer (Owner/Officer/Manager)
Its:	
	Title of Authorized Signer (Owner/Officer/Manager)
	Signature of Authorized Signer (Owner/Officer/Manager)



Dealer Licensing Information

Date:	Dealership Name:						
State of	of Dealership Auction ACCESS® ID:						
License Type	Number	Issue Date	Expiration Date				
Bond Company	Bond Number	Expirati	on Date				
State Tax ID#/Provincial Tax ID#	Issue Date	Expirati	on Date				



Dealership Credit Information

Dealership Name:		Dealership Auction ACCESS® ID:	
		of Contact:	
Address:			
City:	St/Prov: Postal (Code:Country:	
Telephone #:	Fax #:	Date Opened:	
Routing #:	Account #	: <u> </u>	
Bank 2:	Name	of Contact:	
City:	St/Prov: Postal (Code:Country:	
Telephone #:		Date Opened:	
		:	
Finance or Floor Plan:			
Company:	Name of Conta	act:	
Branch:			
City:	St/Prov: Postal G	Code:Country:	
Telephone #:	Fax #:	Date Opened:	
Floor Plan Account #:	Floor Plan Credit Limit:_	Account Opened:	
Finance or Floor Plan:			
	Name of Cont	act:	
		act	
Branch:			
Address:			
City:	St/Prov: Postal (Code:Country:	
Telephone #:	Fax #:	Date Opened:	
		Account Opened:	
Finance or Floor Plan:			
Company:	Name of Contac	et:	
Branch:			
City:	St/Prov: Postal (Code: Country:	
Telephone #:		Date Opened:	
		Account Opened:	
· · · · · · · · · · · · · · · · · · ·			



Dealership Authorization of an Individual

Dealership Name:		Dealership AuctionACCES	SS ID:
Printed Legal Name of Individual	Individ	dual's AuctionACCESS ID	Date of Birth
Add or Change Roles			
By signing or clicking approval below, the "us", or "our") to register the individual li capacity:			
The role designated below will be the role authorization (check one).	e only role in effe	ct for this Individual for this	Dealership, replacing any previous
Representative	Owner	Officer/Manager	Driver
Subject to our acceptance of this authorizate your agent apply at and with us and our subevalid until one business day after we receive (iii) once processed, the most recent authorizansactions thereafter.	bscribing AuctionACC eive and process you	CESS customers ("Customers"), ir ur written notice of termination in	cluding affiliates; (ii) the authorization will the form of a Dealer Removal Letter; and
If you designate the Individual in the capac sell automobiles for you and execute compa at or with any Customer. All categories, ind account.	any checks, drafts, co	ertificates of title, and/or any other	er instruments or documents on your behalf
You guarantee performance of all obligation any Customer. This guaranty includes but inaccurate Odometer Mileage Statements. be amended from time to time and posted manner, honoring all policies and procedure indemnify and hold harmless Customers, Alforegoing, against any liability, loss, damagfee, or other charge, including reasonable a expense incurred in attempting to collect su	is not limited to payr You also guarantee ton www.AuctionACCE as of each, and respe atoTec, LLC, each's a les (including punition attorneys' fees, arisin	ment of losses from dishonored chat the Individual will honor the AESS.com), conduct business with ecting decisions of ours or our Cusffiliates, and the officers, director e damages), claim, settlement pag out of or relating to the authoric	necks or drafts, defective titles, or false or AutoTec Terms and Conditions (as they may us and our Customers in a fair and ethical stomers with respect to same. You will s, employees, and agents of each of the lyment, cost, expense, award, judgment,
Our Customers are third-party beneficiaries themselves of any provision of this agreeme agreement you have with those Customers, business with this Individual as it sees fit.	ent. However, this d	locument is a supplement to, and	
Use of the AuctionACCESS System is open authorize and register only those individual others not affiliated with your business are Individual is affiliated with your business ar obtained for ineligible persons and the right use the System, as well as the right to term	s who are bona fide on the second of the seligible to use the second of	employees or independent contra e System. By signing or clicking ne System. We reserve the right actionACCESS membership if you	ctors for your dealership. Retail buyers or approval below, you also certify that the to immediately terminate any authorization authorize a person who is not eligible to
	me force and effect	as though personally signed by ea	its affiliates, and any Customers, by you or ach of you and may be enforced as originals, lf, or facsimile format.
Signature			
Ву:		Its:	
Printed Name of Authorized Signer (Owner/	Officer/Manager)		of Authorized Signer (Owner/Officer/Manager)
		Dat	e:

Signature of Authorized Signer (Owner/Officer/Manager)



Individual Authorization Letter

Agreement			
Date:	Indiv	vidual's AuctionACCESS ID:	
To Whom It May Conce	rn:		
LLC's AuctionACCESS Sysits customers that subscr Inc. and its affiliates, and AuctionACCESS number) externally, as each sees fother information regardi and consumer reports. Ysame, on an "as is" basis Customers are not limited other businesses providin registration and AutoTec's www.AuctionACCESS.com and truthful, (3) acknowled or credit with any Custom deal or attend, (5) agree their own behalf or on be advertising purpose, usin addresses, and other connumber, or e-mail addressed only to subscribing Custo you to AutoTec, its affiliated.	stem. You hereby authorize Au ibe to AutoTec's AuctionACCES: all other subscribing auctions) at any time ("Customers") to point, the information contained or any ou and/or your dealings wit ou understand that AutoTec property disclaiming any expected to businesses engaged in the aggoods or services to such independent of the area of the are	toTec, LLC, its affiliate Au S System (including Manl and at which you deal (or ovide, obtain, store, use in this application, on any ith each, including transation ovides this information to press or implied warranties automobile dealer or auctionations. By signing below you may be amended from the policies and procedure furance Agency, and substitutionations, or other cust ther business, or other cust ther business, home, or ruis form, or at any other abusiness, and (6) agreems and any other commave the same force and expressions.	e, and share amongst themselves, and other forms provided to AutoTec, and ction, bank, and credit information is said Customers without verifying the estroyer such information. It is still the same of the same
Date of Birth:	Taxpayer ID Number:	Please select ID type	US: Mexico: Other: SSN ITIN CURP N/A
Printed Legal Name of Individual	I	ndividual Signature	
Photo Identification			
Driver's License	State/Province Issued ID	Passport	Voter Registration Card (Mexico Only)
Photo ID Number:		State/Province or C	ountry:
Issue Date:		Expiration Date:	
Contact Information			
Home Address:			
City:		Colony (if applicable)	:
State/Province (if applicable)): 	Posta	l Code:
Country:	- Email]: 	
Mobile Telephone:		Home Telephone:	



Dealership Removal of an Individual

Dealership Name:	Dealership AuctionA(CCESS ID:
To Whom It May Concern:		
Printed Legal Name of Individual	Individual's AuctionACCESS ID	Date of Birth
subscribing AuctionACCESS Customers	you withdraw authorization of the Individual listed ("Customers"). This removal will be effective with ue to monitor your account for unauthorized activit	in one business day of our receipt and
or our Customers, but you will rem the Individual prior to removal, per	ual will no longer be authorized to conduct bu ain responsible for any transactions conducte r the terms of your prior authorization letter a ne to time and posted on www.AuctionAccess.	ed under your AuctionACCESS number by and the AutoTec Terms and Conditions
		,
Signature By:		
,	ed Signer (Owner/Officer/Manager)	
Its:		
Title of Authorized Signer (O	wner/Officer/Manager)	
	Date	:
Signature of Authorized Sign	ner (Owner/Officer/Manager)	



Request for Taxpayer Identification Number and Certification

Give Form to the requester. Do not send to the IRS.

	1 N	ame (as shown on your income tax return). Name is required on this line; do not leave this line blank.				-				
ge 2.	2 B	usiness name/disregarded entity name, if different from above								
Print or type See Specific Instructions on page	3 Check appropriate box for federal tax classification; check only one of the following seven boxes: Individual/sole proprietor or C Corporation S Corporation Partnership Trust/estate single-member LLC						4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any)			
Print or type	Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=partnership) Note. For a single-member LLC that is disregarded, do not check LLC; check the appropriate box in the line above for the tax classification of the single-member owner.								A repo	orting
문능		Other (see instructions) ▶			(App	olies to acc	counts r	naintaine	d outside	the U.S.)
oecific	5 A	ddress (number, street, and apt. or suite no.)	Reques	ter's nar	ne and a	address	(opti	onal)		
See S	6 C	ity, state, and ZIP code								
	7 Li	ist account number(s) here (optional)								
Par	t I	Taxpayer Identification Number (TIN)								
backu reside	p wit nt ali	TIN in the appropriate box. The TIN provided must match the name given on line 1 to average thholding. For individuals, this is generally your social security number (SSN). However, for en, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other	or a	Social	securit	y numb	per	-		
TIN or	,	s your employer identification number (EIN). If you do not have a number, see <i>How to ge</i>	et a	or						
		e account is in more than one name, see the instructions for line 1 and the chart on page	4 for		ver ider	ntificati	on n	umber		
		on whose number to enter.	4 101		-				$\overline{}$	
Part	Ш	Certification								
Under	pena	alties of perjury, I certify that:								
1. The	e nun	nber shown on this form is my correct taxpayer identification number (or I am waiting for	a numb	er to b	e issue	d to m	e); aı	nd		
Ser	vice	t subject to backup withholding because: (a) I am exempt from backup withholding, or (b (IRS) that I am subject to backup withholding as a result of a failure to report all interest or subject to backup withholding; and								
3. I ar	nal	J.S. citizen or other U.S. person (defined below); and								
4. The	FAT	CA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting	ng is cor	rect.						
becau interes genera instruc	se yo st pai ally, p	on instructions. You must cross out item 2 above if you have been notified by the IRS the but have failed to report all interest and dividends on your tax return. For real estate transmid, acquisition or abandonment of secured property, cancellation of debt, contributions to busyments other than interest and dividends, you are not required to sign the certification, son page 3.	actions o an inc	item 2 lividual	does n retirem	ot app ent arr	ly. Fo	or mo	rtgage (IRA)	e , and
Sign Here		Signature of U.S. person ▶ Da	ate ►							
						$\overline{}$		$\overline{}$	$\overline{}$	

General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. Information about developments affecting Form W-9 (such as legislation enacted after we release it) is at www.irs.gov/fw9.

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following:

- Form 1099-INT (interest earned or paid)
- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)

- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding? on page 2.

By signing the filled-out form, you:

- 1. Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
 - 2. Certify that you are not subject to backup withholding, or
- 3. Claim exemption from backup withholding if you are a U.S. exempt payee. If applicable, you are also certifying that as a U.S. person, your allocable share of any partnership income from a U.S. trade or business is not subject to the withholding tax on foreign partners' share of effectively connected income, and
- 4. Certify that FATCA code(s) entered on this form (if any) indicating that you are exempt from the FATCA reporting, is correct. See *What is FATCA reporting?* on page 2 for further information.

Form W-9 (Rev. 12-2014) Page **2**

Note. If you are a U.S. person and a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

Definition of a U.S. person. For federal tax purposes, you are considered a U.S. person if you are:

- An individual who is a U.S. citizen or U.S. resident alien;
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States;
- An estate (other than a foreign estate); or
- A domestic trust (as defined in Regulations section 301.7701-7).

Special rules for partnerships. Partnerships that conduct a trade or business in the United States are generally required to pay a withholding tax under section 1446 on any foreign partners' share of effectively connected taxable income from such business. Further, in certain cases where a Form W-9 has not been received, the rules under section 1446 require a partnership to presume that a partner is a foreign person, and pay the section 1446 withholding tax. Therefore, if you are a U.S. person that is a partner in a partnership conducting a trade or business in the United States, provide Form W-9 to the partnership to establish your U.S. status and avoid section 1446 withholding on your share of partnership income.

In the cases below, the following person must give Form W-9 to the partnership for purposes of establishing its U.S. status and avoiding withholding on its allocable share of net income from the partnership conducting a trade or business in the United States:

- In the case of a disregarded entity with a U.S. owner, the U.S. owner of the disregarded entity and not the entity;
- In the case of a grantor trust with a U.S. grantor or other U.S. owner, generally, the U.S. grantor or other U.S. owner of the grantor trust and not the trust; and
- In the case of a U.S. trust (other than a grantor trust), the U.S. trust (other than a grantor trust) and not the beneficiaries of the trust.

Foreign person. If you are a foreign person or the U.S. branch of a foreign bank that has elected to be treated as a U.S. person, do not use Form W-9. Instead, use the appropriate Form W-8 or Form 8233 (see Publication 515, Withholding of Tax on Nonresident Aliens and Foreign Entities).

Nonresident alien who becomes a resident alien. Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the payee has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items:

- 1. The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
 - 2. The treaty article addressing the income.
- 3. The article number (or location) in the tax treaty that contains the saving clause and its exceptions.
 - 4. The type and amount of income that qualifies for the exemption from tax.
- 5. Sufficient facts to justify the exemption from tax under the terms of the treaty article.

Example. Article 20 of the U.S.-China income tax treaty allows an exemption from tax for scholarship income received by a Chinese student temporarily present in the United States. Under U.S. law, this student will become a resident alien for tax purposes if his or her stay in the United States exceeds 5 calendar years. However, paragraph 2 of the first Protocol to the U.S.-China treaty (dated April 30, 1984) allows the provisions of Article 20 to continue to apply even after the Chinese student becomes a resident alien of the United States. A Chinese student who qualifies for this exception (under paragraph 2 of the first protocol) and is relying on this exception to claim an exemption from tax on his or her scholarship or fellowship income would attach to Form W-9 a statement that includes the information described above to support that exemption.

If you are a nonresident alien or a foreign entity, give the requester the appropriate completed Form W-8 or Form 8233.

Backup Withholding

What is backup withholding? Persons making certain payments to you must under certain conditions withhold and pay to the IRS 28% of such payments. This is called "backup withholding." Payments that may be subject to backup withholding include interest, tax-exempt interest, dividends, broker and barter exchange transactions, rents, royalties, nonemployee pay, payments made in settlement of payment card and third party network transactions, and certain payments from fishing boat operators. Real estate transactions are not subject to backup withholding.

You will not be subject to backup withholding on payments you receive if you give the requester your correct TIN, make the proper certifications, and report all your taxable interest and dividends on your tax return.

Payments you receive will be subject to backup withholding if:

- 1. You do not furnish your TIN to the requester,
- 2. You do not certify your TIN when required (see the Part II instructions on page 3 for details), $\,$

- 3. The IRS tells the requester that you furnished an incorrect TIN.
- 4. The IRS tells you that you are subject to backup withholding because you did not report all your interest and dividends on your tax return (for reportable interest and dividends only), or
- 5. You do not certify to the requester that you are not subject to backup withholding under 4 above (for reportable interest and dividend accounts opened after 1983 only).

Certain payees and payments are exempt from backup withholding. See *Exempt payee code* on page 3 and the separate Instructions for the Requester of Form W-9 for more information.

Also see Special rules for partnerships above.

What is FATCA reporting?

The Foreign Account Tax Compliance Act (FATCA) requires a participating foreign financial institution to report all United States account holders that are specified United States persons. Certain payees are exempt from FATCA reporting. See Exemption from FATCA reporting code on page 3 and the Instructions for the Requester of Form W-9 for more information.

Updating Your Information

You must provide updated information to any person to whom you claimed to be an exempt payee if you are no longer an exempt payee and anticipate receiving reportable payments in the future from this person. For example, you may need to provide updated information if you are a C corporation that elects to be an S corporation, or if you no longer are tax exempt. In addition, you must furnish a new Form W-9 if the name or TIN changes for the account; for example, if the grantor of a grantor trust dies.

Penalties

Failure to furnish TIN. If you fail to furnish your correct TIN to a requester, you are subject to a penalty of \$50 for each such failure unless your failure is due to reasonable cause and not to willful neglect.

Civil penalty for false information with respect to withholding. If you make a false statement with no reasonable basis that results in no backup withholding, you are subject to a \$500 penalty.

Criminal penalty for falsifying information. Willfully falsifying certifications or affirmations may subject you to criminal penalties including fines and/or imprisonment.

Misuse of TINs. If the requester discloses or uses TINs in violation of federal law, the requester may be subject to civil and criminal penalties.

Specific Instructions

Line 1

You must enter one of the following on this line; **do not** leave this line blank. The name should match the name on your tax return.

If this Form W-9 is for a joint account, list first, and then circle, the name of the person or entity whose number you entered in Part I of Form W-9.

a. **Individual.** Generally, enter the name shown on your tax return. If you have changed your last name without informing the Social Security Administration (SSA) of the name change, enter your first name, the last name as shown on your social security card, and your new last name.

Note. ITIN applicant: Enter your individual name as it was entered on your Form W-7 application, line 1a. This should also be the same as the name you entered on the Form 1040/1040A/1040EZ you filed with your application.

- b. **Sole proprietor or single-member LLC.** Enter your individual name as shown on your 1040/1040A/1040EZ on line 1. You may enter your business, trade, or "doing business as" (DBA) name on line 2.
- c. Partnership, LLC that is not a single-member LLC, C Corporation, or S Corporation. Enter the entity's name as shown on the entity's tax return on line 1 and any business, trade, or DBA name on line 2.
- d. Other entities. Enter your name as shown on required U.S. federal tax documents on line 1. This name should match the name shown on the charter or other legal document creating the entity. You may enter any business, trade, or DBA name on line 2.
- e. **Disregarded entity.** For U.S. federal tax purposes, an entity that is disregarded as an entity separate from its owner is treated as a "disregarded entity." See Regulations section 301.7701-2(c)(2)(iii). Enter the owner's name on line 1. The name of the entity entered on line 1 should never be a disregarded entity. The name on line 1 should be the name shown on the income tax return on which the income should be reported. For example, if a foreign LLC that is treated as a disregarded entity for U.S. federal tax purposes has a single owner that is a U.S. person, the U.S. owner's name is required to be provided on line 1. If the direct owner of the entity is also a disregarded entity, enter the first owner that is not disregarded for federal tax purposes. Enter the disregarded entity's name on line 2, "Business name/disregarded entity name." If the owner of the disregarded entity is a foreign person, the owner must complete an appropriate Form W-8 instead of a Form W-9. This is the case even if the foreign person has a U.S. TIN.

Form W-9 (Rev. 12-2014) Page **3**

Line 2

If you have a business name, trade name, DBA name, or disregarded entity name, you may enter it on line 2.

Line 3

Check the appropriate box in line 3 for the U.S. federal tax classification of the person whose name is entered on line 1. Check only one box in line 3.

Limited Liability Company (LLC). If the name on line 1 is an LLC treated as a partnership for U.S. federal tax purposes, check the "Limited Liability Company" box and enter "P" in the space provided. If the LLC has filed Form 8832 or 2553 to be taxed as a corporation, check the "Limited Liability Company" box and in the space provided enter "C" for C corporation or "S" for S corporation. If it is a single-member LLC that is a disregarded entity, do not check the "Limited Liability Company" box; instead check the first box in line 3 "Individual/sole proprietor or single-member LLC."

Line 4, Exemptions

If you are exempt from backup withholding and/or FATCA reporting, enter in the appropriate space in line 4 any code(s) that may apply to you.

Exempt payee code.

- Generally, individuals (including sole proprietors) are not exempt from backup withholding.
- Except as provided below, corporations are exempt from backup withholding for certain payments, including interest and dividends.
- Corporations are not exempt from backup withholding for payments made in settlement of payment card or third party network transactions.
- Corporations are not exempt from backup withholding with respect to attorneys' fees or gross proceeds paid to attorneys, and corporations that provide medical or health care services are not exempt with respect to payments reportable on Form 1099-MISC.

The following codes identify payees that are exempt from backup withholding. Enter the appropriate code in the space in line 4.

- 1-An organization exempt from tax under section 501(a), any IRA, or a custodial account under section 403(b)(7) if the account satisfies the requirements of section 401(f)(2)
 - 2-The United States or any of its agencies or instrumentalities
- $3-\!A$ state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities
- $4-\mbox{\rm H}$ foreign government or any of its political subdivisions, agencies, or instrumentalities
 - 5-A corporation
- 6—A dealer in securities or commodities required to register in the United States, the District of Columbia, or a U.S. commonwealth or possession
- $7\!-\!\mathrm{A}$ futures commission merchant registered with the Commodity Futures Trading Commission
 - 8-A real estate investment trust
- $9-\!$ An entity registered at all times during the tax year under the Investment Company Act of 1940
 - 10-A common trust fund operated by a bank under section 584(a)
 - 11-A financial institution
- $12\!-\!A$ middleman known in the investment community as a nominee or custodian
 - 13-A trust exempt from tax under section 664 or described in section 4947

The following chart shows types of payments that may be exempt from backup withholding. The chart applies to the exempt payees listed above, 1 through 13.

IF the payment is for	THEN the payment is exempt for
Interest and dividend payments	All exempt payees except for 7
Broker transactions	Exempt payees 1 through 4 and 6 through 11 and all C corporations. S corporations must not enter an exempt payee code because they are exempt only for sales of noncovered securities acquired prior to 2012.
Barter exchange transactions and patronage dividends	Exempt payees 1 through 4
Payments over \$600 required to be reported and direct sales over \$5,000 ¹	Generally, exempt payees 1 through 5 ²
Payments made in settlement of payment card or third party network transactions	Exempt payees 1 through 4

¹See Form 1099-MISC, Miscellaneous Income, and its instructions.

² However, the following payments made to a corporation and reportable on Form 1099-MISC are not exempt from backup withholding: medical and health care payments, attorneys' fees, gross proceeds paid to an attorney reportable under section 6045(f), and payments for services paid by a federal executive agency.

Exemption from FATCA reporting code. The following codes identify payees that are exempt from reporting under FATCA. These codes apply to persons submitting this form for accounts maintained outside of the United States by certain foreign financial institutions. Therefore, if you are only submitting this form for an account you hold in the United States, you may leave this field blank. Consult with the person requesting this form if you are uncertain if the financial institution is subject to these requirements. A requester may indicate that a code is not required by providing you with a Form W-9 with "Not Applicable" (or any similar indication) written or printed on the line for a FATCA exemption code.

- A—An organization exempt from tax under section 501(a) or any individual retirement plan as defined in section 7701(a)(37)
- B-The United States or any of its agencies or instrumentalities
- C—A state, the District of Columbia, a U.S. commonwealth or possession, or any of their political subdivisions or instrumentalities
- D—A corporation the stock of which is regularly traded on one or more established securities markets, as described in Regulations section 1.1472-1(c)(1)(i)
- E—A corporation that is a member of the same expanded affiliated group as a corporation described in Regulations section 1.1472-1(c)(1)(i)
- F—A dealer in securities, commodities, or derivative financial instruments (including notional principal contracts, futures, forwards, and options) that is registered as such under the laws of the United States or any state
 - G—A real estate investment trust
- H—A regulated investment company as defined in section 851 or an entity registered at all times during the tax year under the Investment Company Act of
- I-A common trust fund as defined in section 584(a)
- J-A bank as defined in section 581
- K-A broker
- L-A trust exempt from tax under section 664 or described in section 4947(a)(1)
- M-A tax exempt trust under a section 403(b) plan or section 457(g) plan

Note. You may wish to consult with the financial institution requesting this form to determine whether the FATCA code and/or exempt payee code should be completed.

Line 5

Enter your address (number, street, and apartment or suite number). This is where the requester of this Form W-9 will mail your information returns.

Line 6

Enter your city, state, and ZIP code.

Part I. Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. If you are a resident alien and you do not have and are not eligible to get an SSN, your TIN is your IRS individual taxpayer identification number (ITIN). Enter it in the social security number box. If you do not have an ITIN, see *How to get a TIN* below.

If you are a sole proprietor and you have an EIN, you may enter either your SSN or EIN. However, the IRS prefers that you use your SSN.

If you are a single-member LLC that is disregarded as an entity separate from its owner (see *Limited Liability Company (LLC)* on this page), enter the owner's SSN (or EIN, if the owner has one). Do not enter the disregarded entity's EIN. If the LLC is classified as a corporation or partnership, enter the entity's EIN.

Note. See the chart on page 4 for further clarification of name and TIN combinations.

How to get a TIN. If you do not have a TIN, apply for one immediately. To apply for an SSN, get Form SS-5, Application for a Social Security Card, from your local SSA office or get this form online at www.ssa.gov. You may also get this form by calling 1-800-772-1213. Use Form W-7, Application for IRS Individual Taxpayer Identification Number, to apply for an ITIN, or Form SS-4, Application for Employer Identification Number, to apply for an EIN. You can apply for an EIN online by accessing the IRS website at www.irs.gov/businesses and clicking on Employer Identification Number (EIN) under Starting a Business. You can get Forms W-7 and SS-4 from the IRS by visiting IRS.gov or by calling 1-800-TAX-FORM (1-800-829-3676).

If you are asked to complete Form W-9 but do not have a TIN, apply for a TIN and write "Applied For" in the space for the TIN, sign and date the form, and give it to the requester. For interest and dividend payments, and certain payments made with respect to readily tradable instruments, generally you will have 60 days to get a TIN and give it to the requester before you are subject to backup withholding on payments. The 60-day rule does not apply to other types of payments. You will be subject to backup withholding on all such payments until you provide your TIN to the requester.

Note. Entering "Applied For" means that you have already applied for a TIN or that you intend to apply for one soon.

Caution: A disregarded U.S. entity that has a foreign owner must use the appropriate Form W-8.

Form W-9 (Rev. 12-2014) Page 4

Part II. Certification

To establish to the withholding agent that you are a U.S. person, or resident alien, sign Form W-9. You may be requested to sign by the withholding agent even if items 1, 4, or 5 below indicate otherwise.

For a joint account, only the person whose TIN is shown in Part I should sign (when required). In the case of a disregarded entity, the person identified on line 1 must sign. Exempt payees, see Exempt payee code earlier.

Signature requirements. Complete the certification as indicated in items 1 through 5 below

- 1. Interest, dividend, and barter exchange accounts opened before 1984 and broker accounts considered active during 1983. You must give your correct TIN, but you do not have to sign the certification.
- 2. Interest, dividend, broker, and barter exchange accounts opened after 1983 and broker accounts considered inactive during 1983. You must sign the certification or backup withholding will apply. If you are subject to backup withholding and you are merely providing your correct TIN to the requester, you must cross out item 2 in the certification before signing the form.
- 3. Real estate transactions. You must sign the certification. You may cross out item 2 of the certification.
- 4. Other payments. You must give your correct TIN, but you do not have to sign the certification unless you have been notified that you have previously given an incorrect TIN. "Other payments" include payments made in the course of the requester's trade or business for rents, royalties, goods (other than bills for merchandise), medical and health care services (including payments to corporations), payments to a nonemployee for services, payments made in settlement of payment card and third party network transactions, payments to certain fishing boat crew members and fishermen, and gross proceeds paid to attorneys (including payments to corporations).
- 5. Mortgage interest paid by you, acquisition or abandonment of secured property, cancellation of debt, qualified tuition program payments (under section 529), IRA, Coverdell ESA, Archer MSA or HSA contributions or distributions, and pension distributions. You must give your correct TIN, but you do not have to sign the certification.

What Name and Number To Give the Requester

For this type of account:	Give name and SSN of:
Individual Two or more individuals (joint account)	The individual The actual owner of the account or, if combined funds, the first individual on the account
Custodian account of a minor (Uniform Gift to Minors Act)	The minor ²
a. The usual revocable savings trust (grantor is also trustee) b. So-called trust account that is not a legal or valid trust under state law	The grantor-trustee' The actual owner'
Sole proprietorship or disregarded entity owned by an individual	The owner ³
6. Grantor trust filing under Optional Form 1099 Filing Method 1 (see Regulations section 1.671-4(b)(2)(i) (A))	The grantor*
For this type of account:	Give name and EIN of:
7. Disregarded entity not owned by an individual	The owner
8. A valid trust, estate, or pension trust	Legal entity⁴
Corporation or LLC electing corporate status on Form 8832 or Form 2553	The corporation
Association, club, religious, charitable, educational, or other tax- exempt organization	The organization
11. Partnership or multi-member LLC	The partnership
12. A broker or registered nominee	The broker or nominee
13. Account with the Department of Agriculture in the name of a public entity (such as a state or local government, school district, or prison) that receives agricultural program payments	The public entity
14. Grantor trust filing under the Form 1041 Filing Method or the Optional Form 1099 Filing Method 2 (see Regulations section 1.671-4(b)(2)(i) (B))	The trust

List first and circle the name of the person whose number you furnish. If only one person on a joint account has an SSN, that person's number must be furnished.

You must show your individual name and you may also enter your business or DBA name on the "Business name/disregarded entity" name line. You may use either your SSN or EIN (if you have one), but the IRS encourages you to use your SSN.

List first and circle the name of the trust, estate, or pension trust. (Do not furnish the TIN of the personal representative or trustee unless the legal entity itself is not designated in the account title.) Also see Special rules for partnerships on page 2. *Note. Grantor also must provide a Form W-9 to trustee of trust.

Note. If no name is circled when more than one name is listed, the number will be considered to be that of the first name listed.

Secure Your Tax Records from Identity Theft

Identity theft occurs when someone uses your personal information such as your name, SSN, or other identifying information, without your permission, to commit fraud or other crimes. An identity thief may use your SSN to get a job or may file a tax return using your SSN to receive a refund.

To reduce your risk:

- · Protect your SSN,
- Ensure your employer is protecting your SSN, and
- Be careful when choosing a tax preparer.

If your tax records are affected by identity theft and you receive a notice from the IRS, respond right away to the name and phone number printed on the IRS notice or letter.

If your tax records are not currently affected by identity theft but you think you are at risk due to a lost or stolen purse or wallet, questionable credit card activity or credit report, contact the IRS Identity Theft Hotline at 1-800-908-4490 or submit Form 14039

For more information, see Publication 4535, Identity Theft Prevention and Victim

Victims of identity theft who are experiencing economic harm or a system problem, or are seeking help in resolving tax problems that have not been resolved through normal channels, may be eligible for Taxpayer Advocate Service (TAS) assistance. You can reach TAS by calling the TAS toll-free case intake line at 1-877-777-4778 or TTY/TDD 1-800-829-4059.

Protect yourself from suspicious emails or phishing schemes. Phishing is the creation and use of email and websites designed to mimic legitimate business emails and websites. The most common act is sending an email to a user falsely claiming to be an established legitimate enterprise in an attempt to scam the user into surrendering private information that will be used for identity theft.

The IRS does not initiate contacts with taxpayers via emails. Also, the IRS does not request personal detailed information through email or ask taxpayers for the PIN numbers, passwords, or similar secret access information for their credit card, bank, or other financial accounts.

If you receive an unsolicited email claiming to be from the IRS, forward this message to phishing@irs.gov. You may also report misuse of the IRS name, logo, or other IRS property to the Treasury Inspector General for Tax Administration (TIGTA) at 1-800-366-4484. You can forward suspicious emails to the Federal Trade Commission at: spam@uce.gov or contact them at www.ftc.gov/idtheft or 1-877-IDTHEFT (1-877-438-4338).

Visit IRS.gov to learn more about identity theft and how to reduce your risk.

Privacy Act Notice

Section 6109 of the Internal Revenue Code requires you to provide your correct TIN to persons (including federal agencies) who are required to file information returns with the IRS to report interest, dividends, or certain other income paid to you; mortgage interest you paid; the acquisition or abandonment of secured property; the cancellation of debt; or contributions you made to an IRA, Archer MSA, or HSA. The person collecting this form uses the information on the form to file information returns with the IRS, reporting the above information. Routine uses of this information include giving it to the Department of Justice for civil and criminal litigation and to cities, states, the District of Columbia, and U.S. commonwealths and possessions for use in administering their laws. The information also may be disclosed to other countries under a treaty, to federal and state agencies to enforce civil and criminal laws, or to federal law enforcement and intelligence agencies to combat terrorism. You must provide your TIN whether or not you are required to file a tax return. Under section 3406, payers must generally withhold a percentage of taxable interest, dividend, and certain other payments to a payee who does not give a TIN to the payer. Certain penalties may also apply for providing false or fraudulent information.

Circle the minor's name and furnish the minor's SSN.



DEALER REGISTRATION PACKET FOR THOSE WHO HAVE AUCTION ACCESS

**Please provide your 7 or 9 digit Auction Access #: _____

Guaranty			
In consideration of Greater Rockford Auto Auction (GRAA) all undersigned, whether one or more, personally covenant, guathrough GRAA, will be free and clear of all liens and encumbereimburse GRAA for any loss, damage, expense of costs, incl	arantee and warrant tha rances whatsoever. The	at the title to each vehicle sold by Dealer e undersigned unconditionally agrees to	r)
The undersigned further guarantees full payment of any deb Dealer or any of Dealer's representatives, together with any collect such debt, including attorney's fees.			
The undersigned further guarantees the Odometer Mileage S vehicles by it through GRAA, and agrees to reimburse, indem by any such Odometer Mileage Statement which proves to b Odometer Statement Guaranty issued by it in connection wit in collection or attempting to collect such losses, including a	nnify and hold harmless be false or inaccurate, in th any such sale, as wel	s GRAA from all losses and expense caus ncluding payments made by GRAA under	ed it any
The undersigned acknowledges that GRAA shall have the rig any and all collateral security, to extend or change time of pa the undersigned and without discharging or affecting the lial continuing guaranty and the undersigned hereby waives not protest, and any notice of non-payment or dishonor. The und surely, and the bankruptcy or any assignment in favor of Cre	ayment and to settle or bility of the undersigned ice of acceptance of thi dersigned shall be liable	compromise with Dealer without notice d hereunder. This guaranty is to be a is guaranty and presentment, demand, e to principal debtor and not merely as	to
This instrument shall bind the respective heirs, executors, active benefit of GRAA, it successors, assigns, and subrogees.	dministrators, and assig	gns of the undersigned, and shall ensure	∍ to
Where there is more than one signatory to this agreement eagreement.	ach signatory shall be jo	ointly and severally liable under this	
Dealership Name:			
Signature of Owner or Officer:	Title:	Date:	
Owner or Officer's Printed Name:			

Mailing Preferences

In order to provide our customers with the finest service possible, we offer several options in which to receive your title work. Please choose from the following selections listed below, sign and fax to Pam Atchison at 815-874-3389.

(1)	Please do not mail my titles. I prefer to pick them up at the auction.
(1)	Please do not mail my checks. I prefer to pick them up at the auction.
(2)	Please send my titles and checks FIRST CLASS MAIL.
	(GRAA is not responsible for lost titles or checks through US mail.)
(3)	Please send my titles and checks CERTIFIED MAIL \$9 per mailing.
(4)	Bill my Federal Express Account, my account # is:
(5)	Please send my titles and checks OVERNIGHT MAIL \$18 per overnight package.
Author	zed Agent Signature:
Printed	Name:
Dealer	ship:
Phone:	
Deale	r Representation Authorization Date:
to repressale of mapproving and accepthrough	advise that Greater Rockford Auto Auction (GRAA) is hereby appointed attorney-in-fact for, and is authorized ent (Dealership name) in any and all transactions involving the purchase and otor vehicles at GRAA including, but not limited to, bringing motor vehicles to GRAA for sale, setting and g the sale prices for motor vehicles, assigning and reassigning titles held in Dealer's name, bidding, purchasing or bring assignments and reassignments of titles to Dealer, and accepting delivery of motor vehicles purchased GRAA by Dealer, the execution of odometer (mileage) statements and any other documents required pursuant to GRAA in connection with the purchase and sale of motor vehicles.
	rther agrees to honor and abide by the terms of any transaction, representation and/or warranty concerning the and sale of motor vehicles entered into or made by Agent.
This aut	horization shall remain in full force and effect until Dealer gives written notice of its revocation to
Name o	f Dealer: Dealer #:
Rv. N	me Title•





www.graa.net

MARKETING COMMUNICATION PREFERENCE FORM

PLEASE LET US KNOW HOW YOU WOULD LIKE TO RECEIVE VEHICLE LISTS, MARKET REPORTS AND INFORMATION ON SPECIAL PROMOTIONS.

Dealership Name: _	City:	State:
Repre	esentative Name:	
	Email:	_
	Fax:	_
	I would like someone to call me to help me set up my account.	y Edge Pipeline and Autolookout
Repre	esentative Name:	-
	Email:	_
	Fax:	_
	I would like someone to call me to help me set up my account.	Edge Pipeline and Autolookout
Repre	esentative Name:	_
	Email:	-
	Fax:	_
	I would like someone to call me to help me set up my account.	Edge Pipeline and Autolookout
above, hereby grant of and information from	, being the owner/authorized repon behalf of the Dealership its express permission and on the Greater Rockford Auto Auction on behalf of sellers and email addresses listed above.	consent to receive advertising offers
Name:		/
		#:()
Signature:		

(Please keep this page for your records. No need to fax back to us.)

Greater Rockford Auto Auction Live Internet Bidder Registration/Agreement

We are happy to be part of the EdgePipeline network. To purchase vehicles online, please visit the GRAA website.

www.graa.net

Simply go to <u>www.graa.net</u> and click on *Edge Pipeline Login*, at the top right side of the GRAA homepage. This takes you directly to the Edge Pipeline register and login page.



By using this link on the GRAA website, you will be able to obtain a username and password. This is a very easy process and you will only need your e-mail address and AuctionACCESS number or other basic information should you not have an AuctionACCESS number.

All online purchases will incur a \$50 internet buyer fee in addition to regular buy fees.

Courtesy of the GRAA website, in addition to buying online at Edge Pipeline, you will also be able to view inventory, view market reports, and check account status by registering with AutoLookout. This register and login area is found along the top left side of the GRAA homepage. www.graa.net

If you need assistance with the GRAA website, Edge Pipeline or Autolookout, please do not hesitate to contact the sales team at 815-874-7800.



800-987-6627 www.il-iada.org



☐ I consent to receive IIADA communications via email, parcel, e-mail,

telephone, and/or faxes sent by or on behalf of:

STATE & NATIONAL MEMBERSHIP DUES



Name	TOTAL: \$299		
Company Name	Make checks payable to:		
Mailing Address	21200 S. La Grange Rd Suite #356		
City/ State/ Zip	Frankfort, IL 60423		
Shipping Address	Credit Card MasterCard Wisa Novus		
City/State/Zip	Credit Card Number		
State Dealer's License #	Card Name		
Business Phone	Billing Address		
Fax	Expiration Date Security Code		
Email	Signature		

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