

Dealers
Auto Auction
of the Rockies

7175 York Street
Denver, Colorado 80229
Phone: 303-289-7716 Fax: 303-289-9379

Welcome !!

We are Dealers Auto Auction of the Rockies. Our sales are held every Thursday beginning at 9:00 A.M. The last Thursday of the month, we have an on-site salvage sale that begins at 8:30 AM. Our hours are:

Monday	9:00 a.m. to 5:00 p.m.
Tuesday	9:00 a.m. to 5:00 p.m.
Wednesday	9:00 a.m. to 5:00 p.m.
Thursday	7:30 a.m. to 5:00 p.m.
Friday	9:00 a.m. to 3:00 p.m.

In order to process your registration, we require completion of details requested in the attached Dealer Registration Forms, along with receipt of **legible copies** of your:

1. **Current State Dealership License**
2. **Dated Dealer Bond Certificate or Renewal Certificate**
3. **Signed/Dated Agent Authorization Form (attached)**
4. **Salesperson's license for each agent listed on the Authorized Agent Form**
5. **Driver's license for each agent listed on the Dealer Registration Form**
6. **State Sales Tax License**
7. **Signed Authorization to Release Banking Information Form (attached)**
8. **Signed Master Power of Attorney Form (attached)**
9. **Signed Acknowledgement of Receipt of DAAR Policies & Guidelines Booklet (attached)**
10. **Please include your E-mail address on the Registration Form**
11. **Please include your Auction Access # on Registration Form (if applicable)**

THANK YOU from all of us at Dealers Auto Auction of the Rockies. If you have questions, please feel free to give us a call at the number listed above. We look forward to being of service to you!

Lori Martella
Account Representative
lmartella@daarockies.com

"WE APPRECIATE YOUR BUSINESS"

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DEALER REGISTRATION FORM

*AUCTION ACCESS # _____ DATE _____

Company Name _____ # Yrs. In Business _____

Mailing Address (Street or PO Box) _____

City _____ State _____ Zip _____

Dealership Address (if different than above) _____

City _____ State _____ Zip _____ # Miles from DAAR Lot _____

Business Phone # _____ FAX # _____

Mobile Phone # _____ Pager # _____

*E-MAIL _____ Web Site _____

Sole Proprietorship () Partnership () Corporation () LLC ()

Dealership Type: New Car () Used Car () Fleet/Lease () Dealership Lic # _____ State _____

Fed Tax ID# OR SSN _____ State Sales Tax Lic # _____

Principal Contact _____ Mobile # _____

Sales License # _____ Driver's License # _____ State _____

Agent (1) _____ Mobile# _____

Sales License # _____ Driver's License # _____ State _____

Agent (2) _____ Mobile# _____

Sales License # _____ Driver's License # _____ State _____

Agent (3) _____ Mobile# _____

Sales License # _____ Driver's License # _____ State _____

*** Auction Use Only ***

DAAR AUCTION # _____

Banking Information

Bank Name _____ Account # _____

Address _____ Phone # _____

Address _____

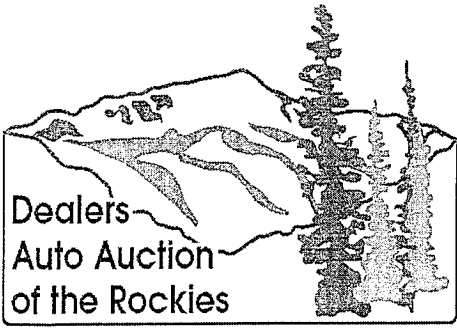
City _____ State _____ Zip _____

Auction Use Only

Date Opened _____ Average Balance _____ Standing _____

Payment Status: Cash () Draft () Check () Other _____

Card Printed Yes () 1 2 3 4 No ()



The following dealership representatives have full authority to represent my dealership in buying and selling vehicles at Dealers Auto Auction of the Rockies. This form is a required document for your protection, as well as that of your dealership.

Agent 1) _____ Sales Lic # _____ State _____ Mobile # _____

Agent 2) _____ Sales Lic# _____ State _____ Mobile # _____

Agent 3) _____ Sales Lic# _____ State _____ Mobile # _____

Agent 4) _____ Sales Lic# _____ State _____ Mobile # _____

Agent 5) _____ Sales Lic# _____ State _____ Mobile # _____

To better serve your needs as seamlessly as possible, and to maintain compliance with State of Colorado law and our auction system requirements, please furnish a copy of a driver's license and valid state salesperson license, if applicable, for each agent listed above.) Future additions and/or deletions to the above list must be submitted in writing and signed by the dealership owner/general manager.

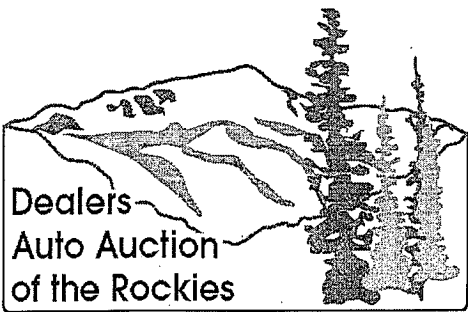
Dealership Name (please print)

Owner Name (please print)

Owner Signature Required

Date

Complete/sign and FAX along with salesperson licenses to Lori @ 303-289-9379.



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MASTER POWER OF ATTORNEY

KNOW ALL MEN BY THOSE PRESENT, that the undersigned _____, do hereby make, Constitute, and appoint Dealers Auto Auction of the Rockies, 7175 York Street, Denver Colorado 80229, as true and lawful attorneys in fact for The sole and exclusive purpose of transferring certificates of title, or applying for duplicate Certificates of title on those certain vehicles owned to transfer title of said vehicles from _____, To the purchases of said vehicle(s).
Dealership Name

FURTHERMORE, this Power of Attorney is limited to those vehicles stored at Dealers Auto Auction of the Rockies, 7175 York St., Denver, CO 80229.

GRANTING and giving unto said attorney in fact full authority and power to do and perform all acts authorized hereby, as fully to all interests and purposes as the grantor might, or could do if personally present, with full power of substitution.

IN TESTIMONY WHEREOF the undersigned has hereunto set his hand on this _____ Day of _____, 20____.

AUTHORIZED SIGNATURE: _____

TITLE: _____

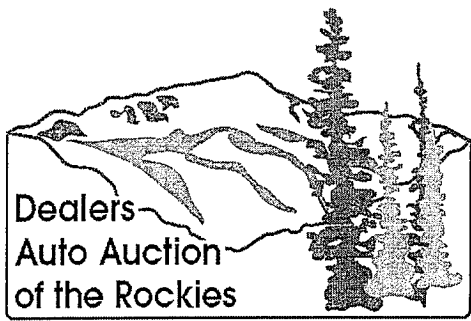
STATE OF _____

COUNTY OF _____

SUBSCRIBED AND SWORN TO BEFORE ME THIS _____ DAY OF _____, 20____

NOTARY PUBLIC _____

MY COMMISSION EXPIRES: _____



AUTHORIZATION TO RELEASE INFORMATION

I/We hereby authorize you to release any and all information that **Dealers Auto Auction of the Rockies** may require for the purpose of granting credit to our dealership at their Auction.

Thank You.

Name of Dealership

Authorized Signature

Date