

DEALER PROFILE

DATE: _____

DEALERSHIP: _____

DEALER PRINCIPLE: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ FAX: _____

OFFICE FAX: _____ F&I FAX: _____

GM: _____

GSM: _____

F&I DIRECTOR: _____

F&I MANAGER (S): _____

OFFICE MANAGER: _____

REMITTANCE: _____

SALES MANAGER: _____

SERVICE MANAGER: _____

GET READY: _____

SALES INFO: _____

*WHO ORDERS SUPPLIES? _____

*WHO ISSUES PURCHASE ORDERS? _____

*WHO SHOULD BE CONTACTED TO RECEIVE CLAIMS? _____

AVERAGE MONTHLY SALES: _____

NEW: _____ USED: _____

GAP POLICIES SOLD & PENETRATION LEVEL: _____

0-60 MONTHS \$ _____ 61-72 MONTHS \$ _____ 73-84 MONTHS \$ _____

DEALER PACK/OVERRIDE - IF APPLICABLE \$ _____

COMMENTS: _____

