Out of Business Form

Date: _____

Dealership Name: _____

Dealership AuctionACCESS ID: _____

Out of Business Date: _____
(If unknown, use approximate date)

Comments:_____

_____

_____

_____

_____

AuctionACCESS Subscribing Customer Use Only

Auction customer reporting this information: _____

Printed name of person completing this form: _____

Signature: _____

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