

Auto Appraisal Group Inc.

Fax 888-575-9319
1441 Sachem Place, Suite 1, Charlottesville VA 22901

Phone: 434-295-1722
Agency Application

PLEASE PRINT

DATE _____

CONTACT INFORMATION

Full Name _____

Address _____

City, State, Zip _____

Telephone: Home _____ Work _____

Cell _____ Email address _____

BUSINESS EXPERIENCE

Current or Most Recent Employer _____

Location, City, State, Zip _____

Your position, description of duties, experience and accomplishments _____

Employment dates _____ Current Annual Income _____

(optional)

Have you ever been self employed? What type of business? Length of operation?

Have you ever or are you currently working with another appraisal company by performing vehicle inspections? Please explain _____

Are you directly involved in buying or selling automobiles as a dealer or broker? _____

Do you buy and sell cars as a private seller? _____ If so, how many per year? _____

Do you have any car show judging experience? _____

Do you have any sales & marketing experience? _____

How many auto shows/events do you attend a year? _____

Provide previous experience or other information you think would be helpful to us in considering you for this opportunity. (Additional work experience, paid or unpaid, auto club relationships, make and model expertise, appraisal, sales, marketing, photography, or restoration experience, etc.)

Are you proficient at sending and receiving Emails and attachments? _____

What type of digital camera do you have? _____

YOUR MARKET

How did you hear about Auto Appraisal Group? _____

In what geographical area would you like to develop appraisal business? Include major cities & state lines. _____

How many collector car appraisers are in your area? _____

What other active businesses in your area directly service collector car enthusiasts?

U. S. Service Experience: If in the service indicate branch, date entered, date discharged, highest rank or grade, type of discharge, terminal rank or grade.

Have you been convicted of a crime other than traffic violations? Explain _____

Give name, address & phone number of three references who are not related to you. References may or may not be previous employers.

1. _____

2. _____

3. _____

I certify that answers given herein are true and complete to the best of my knowledge. I authorize investigation of all statements contained in this independent agent application including a background check as may be necessary in arriving at an agency candidacy decision.

Signature _____ Date _____