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## DEALER AFFILIATION

**Please note: This information is needed to keep your dealership active with Santander Consumer USA.**

This form must be completed by an OWNER, PARTNER, MEMBER, DIRECTOR, COMPTROLLER OR SOMEONE WHO HAS THE POWER TO EXERCISE A CONTROLLING INFLUENCE OVER THE MANAGEMENT OR POLICIES OF THIS DEALERSHIP.

### PRIMARY DEALER INFORMATION

Check here if your dealership is not affiliated with any other dealership (no affiliations)

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DEALERSHIP NAME

---

SIGNATURE

---

PHYSICAL ADDRESS

---

PRINTED NAME

---

CITY, STATE AND ZIP

---

TITLE

---

PRIMARY CONTACT NUMBER

---

(FOR EXISTING DEALERS) SANTANDER CONSUMER USA VENDOR #

### #1 DEALERSHIP

---

dealership name/dba

---

dealership name/dba

---

federal tax i.d. number for this location

---

federal tax i.d. number for this location

---

this dealership location physical address

---

this dealership location physical address

---

city, state and zip

---

city, state and zip

---

(For existing dealers) Santander Consumer USA Vendor#

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(For existing dealers) Santander Consumer USA Vendor#

### #3 DEALERSHIP

---

dealership name/dba

---

dealership name/dba

---

federal tax i.d. number for this location

---

federal tax i.d. number for this location

---

this dealership location physical address

---

this dealership location physical address

---

city, state and zip

---

city, state and zip

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(For existing dealers) Santander Consumer USA Vendor#

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(For existing dealers) Santander Consumer USA Vendor#

### #4 DEALERSHIP

**Duplicate this form if you have more than four stores.**