



11720 Beltsville Drive, Suite 160  
 Beltsville, MD 20705  
 Toll Free 888-231-3900  
 Fax 301-572-6093

**DEALER APPLICATION**

*BUSINESS NAME (INCLUDE DBA)* \_\_\_\_\_ *PHONE* \_\_\_\_\_ *FAX* \_\_\_\_\_  
 ( ) ( )

*Type of Business*  
 Retail  Home Improvement  Other \_\_\_\_\_ *Date Established* \_\_\_\_\_

*Current Street Address* \_\_\_\_\_ *City* \_\_\_\_\_ *State* \_\_\_\_\_ *Zip* \_\_\_\_\_ *How Long?* \_\_\_\_\_

*Mortgage Holder/Landlord* \_\_\_\_\_ *Address* \_\_\_\_\_ *City/State* \_\_\_\_\_ *Zip* \_\_\_\_\_ *Phone* \_\_\_\_\_  
 ( )

*Ownership*  Sole Owner  Partnership  Yes  No  Corporation  Sub Chapter(s)  
*If sole owner/partnership, is trade style established?*

**PRINCIPAL(S)**

NAME	TITLE	SS#	HOME ADDRESS
NAME	TITLE	SS#	HOME ADDRESS
NAME	TITLE	SS#	HOME ADDRESS

**TRADE REFERENCE(S)**

NAME	ADDRESS	PHONE
NAME	ADDRESS	PHONE
NAME	ADDRESS	PHONE

*The undersigned applicant understands and agrees that the recipient of this application may receive credit information about the applicant, or its executive officers or principals, from third parties such as other businesses, creditors, or third party reporting agencies. Further, the undersigned applicant understands, agrees, and authorizes the recipient of this application to provide credit and experience information, including without limitation information contained in this application, to others seeking such information and expressly authorizes the information on this application to be shared with the recipient's affiliates.*

*FIRM* \_\_\_\_\_ *SIGNATURE (Officer or Principal)* \_\_\_\_\_ *DATE* \_\_\_\_\_  
 / /

Come visit us at our web site [www.AtlanticFinancialInc.com](http://www.AtlanticFinancialInc.com)



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**DEALER AGREEMENT**

THIS INDEMNITY AGREEMENT, is made this \_\_\_\_ day of \_\_\_\_\_, 2009, by and between Atlantic Financial, Inc. ("Atlantic") and \_\_\_\_\_ and its owners/stockholders (collectively, "Dealer").

WHEREAS, dealer had requested Atlantic to provide certain financing to dealer or customers of Dealer in connection with home improvements performed by Dealer or other installment sales ("the financing"). Atlantic is willing to provide the financing provided this Indemnity Agreement is executed by Dealer.

NOW, THEREFORE, in consideration of the sum of One Dollar (\$1.00) paid by Atlantic, and other good and value consideration, receipt of which is hereby acknowledged, the undersigned (collectively "Dealer"), jointly and severally agree to indemnify and hold harmless at all times Atlantic, its stockholders, officers and directors from any losses or damages (including reasonable attorneys fees) sustained by them or any of them by reason of any claim, counterclaim, suit or action (collectively "Claim") by a customer of Dealer or an assignee of Atlantic or any governmental or administrative agency, pertaining to any home improvements performed by Dealer or any home improvement contract, installment sale or loan (collectively "Loan") between Dealer and its customers. This Indemnity Agreement shall apply to all future financing and transactions prior to the date Atlantic receives a termination in writing by the Dealer, and its stockholders/owners. In the event of any action pursuant to this indemnity, all parties waive a jury trial.

PROVIDED, further, in the event of any Claim, dealer shall thereupon, at Atlantic's option, repurchase without recourse such Loan at a price equal to the then net outstanding balance of such Loan, adjusted for any premium or discount, based on the remaining term of a sixty (60) month anticipated life from the date of financing by Atlantic.

IN WITNESS WHEREOF, the parties have signed this Agreement as of the day and year above written.

IN WITNESS WHEREOF, the parties have executed this Agreement under seal.

WITNESS:

\_\_\_\_\_  
 J. Scott Austin  
 Home Improvement Director

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

ATLANTIC FINANCIAL, INC.

BY: \_\_\_\_\_ (SEAL)  
 Steven Isaac, President

OWNER/COMPANY NAME

BY: \_\_\_\_\_ (SEAL)  
 Owner or Officer

BY: \_\_\_\_\_ (SEAL)  
 Owner/Stockholder

BY: \_\_\_\_\_ (SEAL)  
 Owner/Stockholder

BY: \_\_\_\_\_ (SEAL)  
 Owner/Stockholder



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## LET US BE YOUR GUIDE

### DEALER CHECK LIST

	<b>DEALER APPLICATION</b>
	<b>COPY OF LICENSES IN EACH STATE DOING BUSINESS</b>
	<b>SIGNED AND DATED DEALER AGREEMENT</b>
	<b>COPY OF WORK ORDER CONTRACTOR</b>
	<b>COPY OF CURRENT FINANCIAL STATEMENT</b>
	<b>LIST OF THREE (3) CUSTOMER REFERENCES THAT HAVE HAD WORK COMPLETED IN THE LAST 12 MONTHS BY YOUR COMPANY</b>



COME VISIT US AT [www.atlanticfinancialinc.com](http://www.atlanticfinancialinc.com)