

Independent DMS Integration Form

F&I Express eContracting



F&I EXPRESS
SIMPLIFY YOUR F&I

| | | | |
|------------------------|--------------|-----------------|--------------|
| Dealership Name | | Address | |
| _____ | _____ | _____ | _____ |
| City | State | Zip Code | Phone |
| _____ | _____ | _____ | _____ |

Dealership Contact Information

| Title | Name | Phone | Email |
|-----------------|------|-------|-------|
| F&I Director | | | |
| Business Office | | | |
| IT Manager | | | |

| | |
|--------------------------|---|
| <input type="checkbox"/> | Yes, I want the CompliPrice feature to meet my aftermarket compliance policies. |
|--------------------------|---|

Agent Information

| Agent Name | Email | Office Phone | Cell Phone |
|------------|-------|--------------|------------|
| | | | |
| | | | |

Aftermarket Providers Used

| Provider | Dealer ID | Product(s) |
|----------|-----------|------------|
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Authorized F&I Express System Users

| First Name | Last Name | Position | Email |
|------------|-----------|----------|-------|
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| | | | |
| | | | |
| | | | |

Target Install Date: _____

Please choose DMS System:

autoXplorer ___ DCS ___ Frazer ___ Supreme ___ Wayne Reaves ___

Send completed form to newdealer@fandiexpress.com or 855-294-9584 (Fax) **F&I**

Express Dealer Desk: 1-855-364-3977 : Ext. 1