![Hyundai Finance logo]

HYUNDAI DEALER DIRECT REGISTRATION FORM

Hyundai Dealer Direct is a comprehensive grounding and upstream remarketing program offered exclusively to Hyundai dealers.

Dealer Registration Checklist:

- Uniform Sales & Use Tax Certificate (Excluding dealers in**: GA, IN, LA, MA, MS, NY, VA, WY.)**
- Dealers in **GA, IN, LA, MA, MS, NY, VA, WY: Please provide your state's individual Tax Resale Certificate**

Simply print, complete and fax this form, along with the forms listed in the checklist above to: Hyundai Dealer Direct at 1-602-412-5440 or by email: hdd@openlane.com.

CONTACT US:

If you have any questions about registration, technical assistance, or user login, please contact us at: Hyundai Dealer Direct 1-888-512-7711.

Dealership Legal Name

Trading Name

Dealer Number (example: H1234)

State of Incorporation
Dealership Auction ACCESS Number

Street Address

City

State, Zip

Dealership Phone Number

Dealership Fax Number

Section II. AUTHORIZED USER FORM

Please complete the Authorized Users table by filling in the names and business contact information of those individuals, whom the Eligible Participant authorizes to access the Hyundai Dealer Direct online auction (the **"Auction"**).

For additional or new users please print and fill out the authorized user form and fax to Hyundai Dealer Direct support at 1-602-412-5440 or by email: hdd@openlane.com

User Information:

Legal First Name _____

Legal Last Name _____

Title _____

Requested User Name _____

Office Phone _____

Cell Phone _____

Fax Number _____

Email _____

Authorization: ☐ **Buy** ☐ **View/Turn-in**

User Information:

Legal First Name _____

Legal Last Name _____

Title _____

Requested User Name _____

Office Phone _____

Cell Phone _____

Fax Number _____

Email _____

Authorization: ☐ **Buy** ☐ **View/Turn-in**

UNIFORM SALES & USE TAX CERTIFICATE—MULTIJURISDICTION

The below-listed states have indicated that this form of certificate is acceptable. For instructions and additional information please visit http://www.mtc.gov/resources.aspx?id=1594.The issuer and the recipient have the responsibility of determining the proper use of this certificate under applicable laws in each state, as these may change from time to time.

Issued to Seller: _____

Address: _____

I certify that: is engaged as a registered
Name of Firm (Buyer): _____   ☐ Wholesaler
Address: _____   ☐ Retailer
_____   ☐ Manufacturer
_____   ☐ Seller (California)
_____   ☐ Lessor
_____   ☐ Other (Specify) _____

and is registered with the below listed states and cities within which your firm would deliver purchases to us and that any such purchases are for wholesale, resale, ingredients or components of a new product or service[1] to be resold, leased, or rented in the normal course of business. We are in the business of wholesaling, retailing, manufacturing, leasing (renting) the following:

Description of Business: _____

General description of tangible property or taxable services to be purchased from the seller: _____

_____

State	State Registration, Seller's Permit, or ID Number of Purchaser	State	State Registration, Seller's Permit, or ID Number of Purchaser
AL[1]	_____	MO[16]	_____
AR	_____	NE[17]	_____
AZ[2]	_____	NV	_____
CA[3]	_____	NJ	_____
CO[4]	_____	NM[4,18]	_____
CT[5]	_____	NC[19]	_____
DC[6]	_____	ND	_____
FL[7]	_____	OH[20]	_____
GA[8]	_____	OK[21]	_____
HI[4,9]	_____	PA[22]	_____
ID	_____	RI[23]	_____
IL[4,10]	_____	SC	_____
IA	_____	SD[24]	_____
KS	_____	TN	_____
KY[11]	_____	TX[25]	_____
ME[12]	_____	UT	_____
MD[13]	_____	VT	_____
MI[14]	_____	WA[26]	_____
MN[15]	_____	WI[27]	_____

I further certify that if any property or service so purchased tax free is used or consumed by the firm as to make it subject to a Sales or use Tax we will pay the tax due directly to the proper taxing authority when state law so provides or inform the seller for added tax billing. This certificate shall be a part of each order which we may hereafter give to you, unless otherwise specified, and shall be valid until canceled by us in writing or revoked by the city or state.

Under penalties of perjury, I swear or affirm that the information on this form is true and correct as to every material matter.

Authorized Signature:_____
(Owner, Partner or Corporate Officer)

Title: _____

Date:_____