



Third Party Authorization and Agreement for

	F&	I Express	eContracting			
Dealership Name:			Address:			
City:	State:		Zip Code:		Phone:	
	Dor	ninion DN	<u> </u>		<u> </u>	
We authorize Superior Integrated Solutions Superior Integrated Solutions INC. will not to us and will not be viewed and/or altered agreement and all work requested will be or software licensed by us for the sole purpose agrees to the terms and conditions contained. The undersigned further acknowledges and and are binding on the parties hereto. *Authorized Signature	be held liable for any system without our consent. Superior ar sole property and will not lead this agreement. The under d in the End User License Agagrees that the terms of the services and the services are th	n-related issues n r Integrated Solu be removed and/ rrsigned acknowl greement, which	ot directly related to the pro- tions Inc. will have access to or altered without our conse- edges and agrees that by ex- is located at: https://superio- tense Agreement are fully in	gramming reques o our system with ent. Superior Integ ecuting this Third rintegratedsolution	t. Information of in the specified rated Solutions Party Work Agns.com/eula lice	n our system is proprietary parameters of these. Inc. will be using the reement it has read and ensing-agreementnew.pdf. 'hird Party Work Agreement
Dealership Contact Information Title	on Name		Phone			Email
*Owner/Principle, General Manager or Comptroller F&I Director	Name		1 Hone			Eman
Business Office						
IT Manager						
Agent Information						
Agent Name	Email	Email Office 1		one Cell Phone		
Aftermarket Providers Used				•		
Provider Provider		Deal	er ID		Produ	ict(s)
TTOVICE		Dealer ID		1 Toduct(s)		
1						
Authorized F&I Express Syst	em Users					
The person designated below as an	administrator is author					
Dealer principal understands that a		n individuals	will have administrative	ve rights on the	e F&I Expre	ss Direct Platform,
including the ability to set up addit						
First Name	Last Name	Tit	le/Position	Ema	<u> </u>	Administrator
						<u> </u>
						<u> </u>
		·	<u> </u>			•
Target Install Date:	· · · · · · · · · · · · · · · · · · ·					·
* Required		* A	uthorized Signature (Officer of the (Company)	Date

Send completed form to $\underline{newdealer@fandiexpress.com}$

F&I Express Dealer Desk: 1-855-364-3977, Ext. 1



F&I Express SecureVUE Authorization - Third Party

Dealers have the option of requesting that Dominion DMS allow **F&I Express** to connect with its SecureVUE for the purposes of extracting data from the dealership's databases for delivery to third parties of the dealership's choosing. In order to open this communication channel between the dealer and the third party for dissemination, Dominion DMS will need the dealership's written authorization and approval.

party for dissemination	i, Dominion Divis win need the dealership s	written authorization and approvar.			
Dealership Name:					
Contact Person:					
ndicate Dealership's Choice:	☐ We do not authorize Dominion DMS to open a SecureVUE communication channel with F&I Express .				
	☐ We authorize Dominion DMS to open with F&I Express in order to collect and to the following party:				
	With the above authorization, we approve	e sharing the following data:			
	Customer Information from DMS Customer Information to DMS	Personnel Information from DMS Dealership DMS Setup Sharing			
	☐ Labor Ops (Op Codes) from DMS ☐ Repair Orders from DMS ☐ Repair Orders to DMS	☐ Service Appointments from DMS ☐ Service Appointments to DMS			
	☐ Parts Inventory from DMS ☐ Parts Inventory to DMS ☐ Parts Activity from DMS	Vehicle Inventory from DMS■ RDR (Deals/Sales) from DMS■ RDR (Deals/Sales) to DMS			
transmission of person and/or deal details. By software to facilitate tl	athorizing this connection between SecureVU all and proprietary information including cust signing below, we authorize Dominion DMS are sharing of this information and hereby agreeir officers, and employees, from all claims authorized.	tomer details, inventory levels and sales, S to adapt our Dominion <i>ACCESS</i> ee to release Dominion DMS, its			
Authorizing Signature		Date			
Print Name		Title			

Any electronic communication is considered an original document and will be part of your file at Dominion DMS. Dominion DMS □ PO Box 81147 □ Mobile, AL 36689-1147 □ (800) 227-8187 □ Fax (251) 662-1981



Dealership Name:	
Address:	
Contact Name:	
Email:	Phone:
DMS:	Est. Monthly Contract Volume:
	it card by viewing the monthly emailed invoice and ia ACH, please reach out in a separate email ITI reserves the right to discontinue DMS ancelled when the party responsible for the monthly to be moved to standard integration. The last day
Contact and Billing Information	
Party responsible for setup fee:	
Name:	Company:
Address:	Phone:
Email:	Invoices sent to:
Signature	Date:
Party responsible for monthly fee:	Commonw
Name:	Company:
Address:	Phone:
Email:	Invoices sent to:
Signature	Date: