



Third Party Authorization and Agreement for

Dealership Name: City:		Audress:		Address:		
City.	•		Address:			
City.	State:	Zip Code:	Phon	e:		
		DPC DMS Information				
☐ DPC Third Party Authori	ization Form Complet	ed				
superior Integrated Solutions INC. will to us and will not be viewed and/or alter greement and all work requested will be oftware licensed by us for the sole purgerees to the terms and conditions contains.	not be held liable for any systed without our consent. Super our sole property and will repose of this agreement. The unined in the End User License	nodem and/or network to our computer system-related issues not directly related to the prior Integrated Solutions Inc. will have account be removed and/or altered without our ondersigned acknowledges and agrees that be Agreement, which is located at: https://supaid End User License Agreement are fully	e programming request. Informations to our system within the spectonsent. Superior Integrated Solvy executing this Third Party Westeriorintegrated solutions.com/euincorporated and included in this	ation on our system is proprietal cified parameters of this ations, Inc. will be using the book Agreement it has read and all licensing-agreementnew.pc is Third-Party Work Agreemen		
*Authorized Signature:		Printed Name:		Date:		
Dealership Contact Informa Title	ation Name	Pho	10	Email		
*Owner/Principle, General	Taille	1 HOI		Liliali		
Manager or Comptroller						
F&I Director						
Business Office						
IT Manager						
Agent Information Agent Name	Email	Office	Dhono	Cell Phone		
Agent Name	Ellian	Office	i none	Cen rhone		
	•					
Aftermarket Providers Use Provider	d	Dealer ID	р	moduat(s)		
Frovider		Dealer ID	Ι.	Product(s)		
Dealer principal understands tha	an administrator is aut at as an administrator, s	norized to add users to the F&I Exuch individuals will have administ				
ncluding the ability to set up ad		TF'/I /D '/'	T 12			
First Name	Last Name	Title/Position	Email	Administrator		
1						

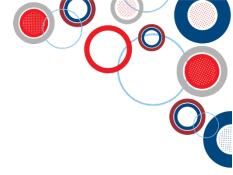
Send completed form to newdealer@fandiexpress.com

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



Dealership Name:	
Address:	
Contact Name:	
Email:	Phone:
DMS:	Est. Monthly Contract Volume:
Payment methods We accept credit card, check, or ACH. You can pay via credit clicking on the pay now button. If you would like to pay via to billing@fandiexpress.com and the form will be sent to you. integration if the account is in default.	t card by viewing the monthly emailed invoice and a ACH, please reach out in a separate email
Terms and Conditions This agreement is a month-to-month agreement and can be ca fee sends an email to billing@fandiexpress.com and request to notify F&I Express so you will not be charged the following	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:	
Name:	Company:
Address:	Phone:
Email:	Invoices sent to:
Signature	Date:





Vendor Authorization

- One form per store location for each vendor to be authorized
- Vendor fills in connection requirements, Dealership completes form and signs to authorize
- Email completed form to support.int@dealerbuilt.com
- * denotes required field

Vendor Name*: F&I Express		Contact*: John Sadofsky	
Address: 2147 NJ-27 Suite 113		Email*: JSadofsky@4-superior.com	
City, State, Zip: Edison, NJ 08817		Phone*: 908-222-4020	
Access Method(s)*:			
On-Demand (API)		Export Credentials -	
		Host:	
Periodic/Historical Export		Path:	
Individual Integration		UN:	
		PW:	
	_	111-1-2-12-1-11-1-6	
File Name	Frequency	Historical? Indicate Span	
File Name	Frequency	Historical? Indicate Span	
File Name	Frequency	Historical? Indicate Span	
File Name	Frequency	Historical? Indicate Span	
File Name	Frequency	Historical ? Indicate Span	
File Name	Frequency	Historical ? Indicate Span	
File Name Dealership*:	Frequency	Contact*:	
	Frequency		
Dealership*:	Frequency	Contact*:	
Dealership*: Address*:	Frequency	Contact*: Email*:	
Dealership*: Address*: City, State, Zip*:	Frequency	Contact*: Email*: Phone*:	

Questions? Contact us at -

support.int@dealerbuilt.com or (800) 499-1914

Recipient agrees to use its best efforts to prevent and protect the Confidential Information, or any part thereof from disclosure to any person other than Recipient's employees having a need for disclosure in connection with Recipient's authorized use of the Confidential Information. This authorization may incur additional charges for the dealership, please check with your DealerBuilt account manager for details.

