

A.I.A.D.A. FORMS

Designated# _____ Dealer License# _____
 Dealership _____ Contact _____ Date _____
 Address _____ City _____ St _____ Zip _____
 Phone _____ Fax _____ Email _____ Member Yes No

<u>QTY</u>	<u>DESCRIPTION</u>	<u>MEMBER PRICE</u>	<u>TOTAL</u>	<u>NON MEMBER PRICE</u>	<u>TOTAL</u>
_____	FTC Window Stickers Buyers Guide/2Part NCR paper	\$10.00 per 100	_____	\$18.00 per 100	_____
_____	Spanish FTC Window Stickers Buyers Guide/2 Part/NCR	\$15.00 per 100	_____	\$25.00 per 100	_____
_____	Title Supplemental Reassignment Forms (MVT 8-3)	\$11.00 per 100	_____	\$18.00 per 100	_____
_____	FTC Buyers Guide Holders (Clear Plastic)	\$.75 each	_____	\$ 1.00 per 100	_____
_____	Odometer Forms/3 part/NCR paper	\$12.00 per 100	_____	\$20.00 per 100	_____
_____	Secure Power of Attorney (MVT 8-4)	\$18.00 per 100	_____	\$20.00 per 100	_____
_____	Secure Affidavit of Correction (MVT 5-7)	\$18.00 per 100	_____	\$26.00 per 100	_____
_____	Authorization for Payoff/Demand for Title	\$ 7.75 per 100	_____	\$11.25 per 100	_____
_____	Agreement & Acknowledgement of Good Will Service	\$10.00 per 100	_____	\$16.25 per 100	_____
_____	Blank Bill of Sale with Disclaimer (2 Parts)	\$18.50 per 100	_____	\$24.00 per 100	_____
_____	Vehicle Invoice Bill of Sale (3 Part)	\$20.00 per 100	_____	\$28.00 per 100	_____
_____	Credit Applications	\$ 9.00 per 100	_____	\$16.00 per 100	_____
_____	Damaged Vehicle Disclosure Prior Body Repair	\$ 9.00 per 100	_____	\$15.00 per 100	_____
_____	Warranty Disclaimers-AS IS (not for window display	\$10.00 per 100	_____	\$18.00 per 100	_____
_____	Affidavit for Out of State Vehicles	\$10.00 per 100	_____	\$15.00 per 100	_____
_____	Arbitration Agreements	\$25.00 per 100	_____	\$32.00 per 100	_____
_____	Disclosure of Prior Use of Vehicle	\$22.00 per 100	_____	\$25.00 per 100	_____
_____	No. 14 Inventory File Jackets (9 1/2 X12)	\$30.00 per 100	_____	\$40.00 per 100	_____
_____	General Power of Attorney (MVT 5-13)	\$12.00 per 100	_____	\$18.00 per 100	_____
_____	Gramm Leach Bliley Privacy Notice	\$18.00 per 100	_____	\$25.00 per 100	_____
_____	UCC "Notice of Our Plan to Sell Property"(repossession)	\$ 6.25 per 50	_____	\$10.00 per 50	_____
_____	UCC "Explanation of Surplus or Deficiency (repossession)	\$ 6.25 per 50	_____	\$10.00 per 50	_____
_____	Agreement to Provide Insurance /2 Part NCR	\$20.00 per 100	_____	\$28.00 per 100	_____
_____	Test Drive Agreement	\$ 9.00 per 100	_____	\$16.00 per 100	_____

*****PLEASE SEE SHIPPING RATE CHART ON BACK.
 IF YOU WANT TO CHARGE TO A VISA, MC,
 DISCOVER, AMEX, THE INFO TO FILL IN IS ON BACK OF
 THIS ORDER. Residential Charges also on back.

Sub Total _____	Sub Total _____
Shipping & Handling _____	Shipping & Handling _____
SUB TOTAL _____	SUB TOTAL _____
4% State Sales Tax _____	4% State Sales Tax _____
6% Jefferson Co. Tax _____	6% Jefferson Co. Tax _____
(See Chart on other side)Residential Shipping Charge _____	Residential Shipping Charge _____
TOTALS _____	TOTALS _____

(OVER)

PLEASE USE THE CHART BELOW TO DETERMINE THE AMOUNT FOR SHIPPING YOUR ORDER .

MEMBER SHIPPING & HANDLING CHART

<u>AMOUNT</u>	<u>UPS</u>
UP TO \$25.00	\$10.50
\$26.00 TO \$50.00	12.00
\$51.00 TO \$100.00	15.75
\$101.00 AND UP	18.50

NON MEMBER SHIPPING & HANDLING CHART

<u>AMOUNT</u>	<u>UPS</u>
UP TO \$25.00	\$10.60
\$26.00 TO \$50.00	12.50
\$51.00 TO \$100.00	18.25
\$101.00 AND UP	21.50

******CASES OF FORMS WILL BE WEIGHED AND CHARGED ACCORDINGLY.**

RESIDENTIAL SHIPPING CHARGES:

- ADD \$2.00 FOR RESIDENTIAL SHIPPING ADDRESS
- ADD \$2.50 FOR RURAL RESIDENTIAL SHIPPING ADDRESS
- ADD \$2.00 FOR RURAL COMMERCIAL SHIPPING ADDRESS

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MAKE CHECKS PAYABLE TO A.I.A.D.A. *P.O. BOX 19627***BIRMINGHAM, AL 35219**

- ❖ MEMBERS MAY FAX ORDER TO 205-942-3565 AND BE BILLED IF YOUR ACCOUNT IS IN GOOD STANDING.
- ❖ NON MEMBERS CAN FAX ORDER IF CHARGED TO VISA, MASTERCARD, DISCOVER OR AMERICAN EXPRESS.

NOTE: Orders received without proper sales tax and shipping charges cannot be processed.

e-mail address is info@alabamaiada.com

website is www.alabamaiada.com

PLEASE FILL IN IF YOU WANT TO CHARGE ON YOUR VISA, MASTERCARD, DISCOVER OR AMEX:

CREDIT CARD TYPE: MASTERCARD____VISA____DISCOVER____AMEX____

CREDIT CARD #_____

EXPIRATION DATE_____ **CVV#**_____ (3 OR 4 DIGIT CODE ON FRONT OR BACK)

CARD NAME:_____

SIGNATURE:_____