



The Name You Can Trust.

**Leith Automotive Group**

**Wholesale Parts Network**

5800 Oak Forest Dr

Raleigh, NC 27616

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## Leith Automotive Group Charge Account Information

Thank you for your interest in establishing a charge account with the **Leith Wholesale Network!**

The following application can be used to establish an account with any of the dealerships that are part of the **Leith Wholesale Network**. However, the dealerships that make up the **Leith Wholesale Network** are grouped under different corporations, and each corporation has its own accounting system. For this reason, your account numbers will likely be different depending on the corporation.

Below is a brief listing of our **Leith Automotive Group** dealerships by corporation. *Each corporation issues a combined monthly statement for its dealerships.*

### Leith Inc.

Alfa Romeo / Maserati of Raleigh  
Audi Cary  
Audi Raleigh  
AutoPark Chrysler Jeep (Cary)  
Jaguar Land Rover Cary  
Jaguar Land Rover Raleigh  
Leith Acura Raleigh  
Leith BMW  
Leith Chrysler Jeep (Raleigh)  
Leith Honda (Raleigh)  
Leith Lincoln  
Leith Porsche  
Leith Volkswagen Raleigh  
Mercedes-Benz of Cary / Smart  
Mercedes-Benz of Raleigh / Sprinter

### Leith of Wendell (AutoPark East)

Leith AutoPark Kia  
Leith Buick GMC  
Leith Chrysler Dodge Jeep<sup>‡</sup>  
Leith Ford

*These dealerships are standalone corporations, and each dealership issues its own separate monthly statement:*

- *Leith Acura Cary*
- *Leith Toyota*
- *Leith Chrysler/Dodge/Jeep (Aberdeen)<sup>‡</sup>*
- *Leith Honda (Aberdeen)<sup>‡</sup>*

<sup>‡</sup>*Not part of the Leith Wholesale Network*

### AutoPark Imports Inc.

AutoPark Honda (Cary)  
Leith Nissan  
Leith Volkswagen Cary

In most cases, ***an account will initially be set up with our Leith Inc. dealerships.*** Within a few days of the approval, a copy of your application will be forwarded to all our corporations. Some may go ahead and establish your account, but most will wait until an order is actually placed.

To help expedite the approval process, ***please provide complete contact information (mailing address, phone, fax), your account number and a specific contact for each listed reference.*** Due to privacy concerns, most our credit checks are conducted via fax or mail.

If you have any questions concerning the application process, please feel free to call the accounting contacts listed on the application or our wholesale manager, **Jason Dunn (919-868-3112)**.

Thanks again for your time and for considering the **Leith Wholesale Network**.



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Leith Automotive Group Wholesale Parts Network
attn: JoAnn Jones-Davis (joann.davis@leithcars.com)
or Candace Wilson-Kearney (candace.wilson@leithcars.com)
Street Address: 5800 Oak Forest Dr Raleigh, NC 27616
Mailing Address: PO Box 40110 Raleigh, NC 27629
Phone: 919-876-5432 Fax: 919-872-0312

Leith Automotive Group Charge Account Application

Full Legal Business or Individual Name: \_\_\_\_\_

Doing Business As: \_\_\_\_\_

Billing Address: \_\_\_\_\_

Billing City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Shipping Address (if different): \_\_\_\_\_

Shipping City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

County of Business: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

E-mail: \_\_\_\_\_

- Type of Business: [ ] Body Shop [ ] Repair/Service Center [ ] Glass/Windshield [ ] Franchise Dealership [ ] Parts Store [ ] Used Car

Federal ID Number (REQUIRED): \_\_\_\_\_ Years in Business: \_\_\_\_\_

- [Check One] [ ] Individual [ ] Partnership [ ] Corporation

Have you or any Company in which you held a controlling interest been adjudged bankrupt? [ ] Yes [ ] No

Are you exempt from paying your state sales tax? [ ] Yes [ ] No

(If "Yes," the E-595E Streamlined Sales Tax Agreement Certificate of Exemption must be completed in full and attached. A copy of your Sales & Use Tax certificate issued by your state is also requested. Forms must be received by the accounting office before your sales tax status will be adjusted.)

Estimated Credit Line Needed \$ \_\_\_\_\_ PO Required [ ] Yes [ ] No

Bank Reference

[A financial statement is required for businesses requesting \$5,000.00 or more in credit and for all companies in business less than two (2) years.]

Name: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Contact Name: \_\_\_\_\_ Phone Number: \_\_\_\_\_



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Credit References (Please include complete mailing address, phone and fax numbers.)

\*\*Please do not list contact information for O'Reilly's Auto Parts, CARQUEST, AutoZone or Advance Auto Parts as we typically are unable to obtain information from these companies.\*\*

Name: Your Account Number:

Mailing Address:

City: State: ZIP:

Phone Number: Fax Number:

E-mail Address:

Name: Your Account Number:

Mailing Address:

City: State: ZIP:

Phone Number: Fax Number:

E-mail Address:

Name: Your Account Number:

Mailing Address:

City: State: ZIP:

Phone Number: Fax Number:

E-mail Address:

We warrant the information provided to be true. I, an authorized officer, grant permission to investigate the references and commercial credit checks. I agree to pay Leith Automotive Group within stated terms of sale. If the account is placed with a collection agency or an attorney, whether a lawsuit is filed or otherwise, or if services of an attorney are required to protect our interest, we agree to pay all collection costs, reasonable attorney's fees, interest, and any cost associated with placing your obligation with a collection agency or attorney. In addition, we agree to pay all charges on all returned checks on our account. We also understand and agree that all litigation will be in the State of North Carolina.

Signature

Date

Print Name

Title



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Release Statement

We realize that our relationship with you is only as strong as the trust exists between us. We have a deep commitment to protecting that trust, while meeting your automotive needs. For that reason, the privacy of your information is important to us.

By signing the release statement, this gives Leith Automotive Group permission to obtain your credit information.

I (We) authorize the release on any bank or trade credit information requested by Leith Automotive Group to process my credit application.

Business Name: \_\_\_\_\_

Billing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Signature

Date

Print Name

Title

(This release statement will be sent to all supplied credit references.)



# E-595E Streamlined Sales and Use Tax Agreement Certificate of Exemption

This is a multi-state form. Not all states allow all exemptions listed on this form. Purchasers are responsible for knowing if they qualify to claim exemption from tax in the state that would otherwise be due tax on this sale. The seller may be required to provide this exemption certificate (or data elements required on the form) to a state that would otherwise be due tax on this sale.

**The purchaser will be held liable for any tax and interest, and possibly civil and criminal penalties imposed by the member state, if the purchaser is not eligible to claim this exemption. A seller may not accept a certificate of exemption for an entity-based exemption on a sale made at a location operated by the seller within the designated state if the state does not allow such an entity-based exemption.**

1  Check if you are attaching the Multistate Supplemental form.

If not, enter the two-letter postal abbreviation for the state under whose laws you are claiming exemption.

2  Check if this certificate is for a single purchase and enter the related invoice/purchase order # \_\_\_\_\_.

### 3 Please print

Name of purchaser \_\_\_\_\_

Business address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

Purchaser's tax ID number \_\_\_\_\_ State of issue \_\_\_\_\_ Country of issue \_\_\_\_\_

If no tax ID number, enter one of the following: FEIN \_\_\_\_\_ Driver's license number/State issued ID number \_\_\_\_\_ Foreign diplomat number \_\_\_\_\_  
*state of issue number*

Name of seller from whom you are purchasing, leasing, or renting

LEITH

Seller's address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_  
PO BOX 40110 RALEIGH NC 27629

### 4 Type of business. Check the number that describes your business.

- 01 Accommodation and food services
- 02 Agricultural, forestry, fishing, and hunting
- 03 Construction
- 04 Finance and insurance
- 05 Information, publishing, and communications
- 06 Manufacturing
- 07 Mining
- 08 Real estate
- 09 Rental and leasing
- 10 Retail trade
- 11 Transportation and warehousing
- 12 Utilities
- 13 Wholesale trade
- 14 Business services
- 15 Professional services
- 16 Education and health-care services
- 17 Nonprofit organization
- 18 Government
- 19 Not a business
- 20 Other (explain) \_\_\_\_\_

### 5 Reason for exemption. Check the letter that identifies the reason for the exemption.

- A Federal government (department) \_\_\_\_\_
- B State government (name) \_\_\_\_\_
- C Tribal government (name) \_\_\_\_\_
- D Foreign diplomat # \_\_\_\_\_
- E \_\_\_\_\_
- F \_\_\_\_\_
- G Resale # \_\_\_\_\_
- H Agricultural production # \_\_\_\_\_
- I Industrial production/manufacturing # \_\_\_\_\_
- J Direct pay permit # \_\_\_\_\_
- K Direct mail # \_\_\_\_\_
- L Other (explain) \_\_\_\_\_

### 6 Sign here. I declare that the information on this certificate is correct and complete to the best of my knowledge and belief.

Signature of authorized purchaser \_\_\_\_\_ Print name here \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

Phone number \_\_\_\_\_ E-mail address \_\_\_\_\_