



# CONTRACT APPLICATION REGISTER

Sales for Month:		Agency Code #:		Agency Name:	
Dealer Name:		Dealer Code #:		Dealer Contact:	
Address:					
Telephone #:		E-mail:			

	VSC Number	Suffix	Owner's Name	VSC Price	Options + Surcharges =		Dealer Remittance
					Type	\$	
	1234567890	VQ	John Smith	785	\$0 Ded	100	1010
					4WD/AWD	125	DO NOT ADD
1.							
2.							
3.							
4.							
5.							
6.							
7.							
8.							
9.							
10.							
11.							
12.							
13.							
14.							
15.							
<b>Total Remittance: \$</b>							

**IMPORTANT:**

Enclose Dealer Check with Register(s),  
MAKE CHECK PAYABLE TO: INTERSTATE

Interstate National Dealer Services, Inc.  
6120 Powers Ferry Rd. NW, Suite 200  
Atlanta, GA 30339  
800-942-0400 www.ind.com