

**EXPERIAN ACCESS AND SECURITY REQUIREMENTS  
ACKNOWLEDGEMENT AND AGREEMENT**

The undersigned hereby acknowledges that they have read, understand and agree to follow the Experian Access and Security Requirements accessed at [www.promaxunlimited.com/access](http://www.promaxunlimited.com/access).

Dealership name \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

By: \_\_\_\_\_

Printed name: \_\_\_\_\_

Title: \_\_\_\_\_

Date Signed: \_\_\_\_\_

Return the signed form by one of the following methods:

By Email: [Access@promaxunlimited.com](mailto:Access@promaxunlimited.com)

By fax: 563-344-7736

By mail: Please use the enclosed pre-addressed and stamped envelope to-  
Dealer Marketing Services, Inc.  
Attn: Access  
5401 Elmore Avenue, Suite 200  
Davenport, IA 52807