

**FLAGSHIP CREDIT ACCEPTANCE
AUTHORIZED SIGNATURE FORM**



Effective Date: _____

The personnel listed below, are authorized to execute legal documents between Flagship Credit Acceptance LLC and _____ (Dealer legal name). Their signature may be accepted as of the effective date listed above.

Authorized Signatories

Printed Name	Position	Signature

By signing below, I certify that the above person or persons are employed by, and have the authority to execute legal documents on behalf of _____ (Dealer legal name).

Dealer Principal

Signature

Printed Name/ Title

Date