

This form is used to give ASR Pro permission to access customer files within the Dealer Management System as well as outline the required access and login needing to be given by the dealer.

Agent Name**DEALER INFORMATION**

<hr/> Dealership Name		<hr/> Dealership Group	
<hr/> Street Address		<hr/> City	<hr/> State <hr/> Zip
<hr/> Dealership Phone Number		<hr/> Fax Number	

CONTACT INFORMATION

<hr/> Sales Contact Name	<hr/> Phone Number	<hr/> Mobile Number	<hr/> E-mail
<hr/> Parts Contact Name	<hr/> Phone Number	<hr/> Mobile Number	<hr/> E-mail
<hr/> Service Contact Name	<hr/> Phone Number	<hr/> Mobile Number	<hr/> E-mail
<hr/> System/ IT Contact Name	<hr/> Phone Number	<hr/> Mobile Number	<hr/> E-mail

REQUIRED INFORMATION

Note: Please allot 20 channels with our login to help us avoid running into errors when pulling your records.

☐ R&R ☐ ADP A ☐ RKONA

<hr/> DMS Type D	<hr/> MS Customer Number
<hr/> User Name/User ID (Upper Case/Lower Case)	<hr/> Permanent Password (Upper Case/Lower Case)
<hr/> IP Address/Server Name	
<hr/> Modem Number 1 (Required)	<hr/> Modem Number 2 (Optional)
<hr/> Service Department Login	

ACCESS REQUIRED**REYNOLDS SYSTEMS :**

Service & Parts – 2021, 2041, 2322,
3010, 3030, 3050, 3100, 3651,
4750, 6900, 6910, 6911, 6930,
7601, 7602

ADP SYSTEMS:

Functions: UF ENG, **UF**, TRM, RGP,
LRO, **USR** (additional access may be
needed)

Supported systems : ADP Elite, ADP
Drive, ADP Websuite 2000 and higher

ARKONA SYSTEMS:

Functions: Data Exchange (additional
access may be needed)

DEALER AUTHORIZATION AGREEMENT

ASR Pro agrees that the contracts between ASR Pro and Dealer constitutes a service provider agreement and is subject to 313.13 of the regulations implementing the Gramm-Leach-Bliley Act, 15 U.S.C. 6801. ASR Pro further agrees that it will, to the extent required by federal law, maintain the confidentiality of, and appropriately safeguard "customer information" as that term is defined in the federal Gramm-Leach-Bliley Act and the Federal Trade Commission's implementing regulations.

By signing below, you state that you have the authority to make this request, and you authorize ASR Pro or it's third party DMS data provider to access your system for the above areas.

Further, you and we agree that a signed original, photocopied, or faxed copy of this Letter of Agreement shall be treated as an original for all purposes.

Please sign below and return to ASR Pro. Fax: 954-301-0377

Signature of Dealer Principal

Printed Name

Title

Date