



Data Transfer Authorization

SiriusXM

Customer/Dealership Information:

Dealership Name _____ Date: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Contact: _____ Email: _____
 Phone: _____ Fax: _____
 Autosoft Acct #: _____ Authorized Recipient #: _____

Customer requests that Autosoft transfer Dealership Data to the following Authorized Vendor Recipient:

Authorized Recipient Name: _____ Contact Name: _____
 Authorized Recipient Phone: _____ Email: _____

Dealership Data Transfer Requested:

Activate	Cancel	Data Type	Method of Delivery	Data File Name	Years of Historical Data?	Sending Interval
<input type="checkbox"/>	<input type="checkbox"/>	Vehicle Inventory	Batch/FTP	Sirius_VehReceivedInv		Daily
<input type="checkbox"/>	<input type="checkbox"/>	Vehicle Sales	Batch/FTP	SiriusXMVehicleSold		Daily
<input type="checkbox"/>	<input type="checkbox"/>	Repair Order	FTP	SiriusXM_VehicleServiced		Daily

CUSTOMER HEREBY ACKNOWLEDGES THAT CUSTOMER HAS READ AND UNDERSTOOD THE DATA TRANSFER TERMS FOUND HERE [AUTOSOFTDMS.COM/DATA-TRANSFER-TERMS/](https://www.autosoftdms.com/data-transfer-terms/) THIS DATA TRANSFER AUTHORIZATION FORM IS SUBJECT TO THE SUPPLEMENTAL TERMS FOR DATA TRANSFER AND IS PART OF THE MASTER SUBSCRIPTION AGREEMENT BETWEEN AUTOSOFT AND CUSTOMER. CUSTOMER AGREES TO, AND INTENDS TO BE LEGALLY BOUND BY, THE SUPPLEMENTAL TERMS FOR DATA TRANSFER.

Customer Signature: _____ **Date:** _____
Printed Name: _____ **Title:** _____

Please complete, sign and return the form via email to SiriusXM. SiriusXM will forward to Autosoft at dcconnect@autosoftdms.com for activation.