

RV OWNER TRANSFER KIT

















Make your dream a reality!



Sell your RV safely - hassle free

Selling your RV never been easier! RVDream has developed the *Classified Sales Program* to help private parties buy and sell their used RVs in a hassle free, secure environment. By partnering with RVDream, you will ensure a smooth sales transaction and prompt payment. RVDream has the resources and expertise to handle all aspects of your private party transaction - at <u>no cost</u> to the selling party!

Our Background

RVDream was founded by professionals with diverse RV industry expertise. Our team has in-depth experience working as executive f & i managers for prominent insurance and lending corporations for over 15 years.

Our experience gives us in-depth knowledge of the selling cycle and we understand what a seller needs to close a deal and make your buyer happy.

We provide prompt, professional, dependable service ... Let us show you the RVDream difference!

RVDream has created the *RV Owner Transfer Kit* to supply sellers with a seamless, secure, and hassle free sales transaction.

We will all the tools and resources necessary to safely and legally transfer the sale of your RV. We will prepare the following services:

- Hassle Free Sales Transaction
- Competitive Financing & Insurance Rates for Buyer
- Extended Warranty Products for Buyer
- Gap Insurance Products for Buyer
- Transference of Titling, Registration
- Bills of Sale
- Prior Loan Payoff
- State Sales and Use Tax Disbursements
- Prompt Closing & Funding
- Secured Payment to Seller

RVDream, Inc. has the resources to close your sale quickly – all while ensuring safe and legal transfer. There is **no cost** to the seller for this transaction.*

"You place the ad, negotiate the sale price, and we'll handle the details of the transaction to provide you with prompt payment."

^{*} Transfer services provided ONLY in conjunction with financial services provided to buyer for the transaction.



Seller's Check List & Contact Info.

We've created a simple checklist to guide you though the setup on your transaction.

To prepare for the transfer, utilize the checklist noted below. Have the documents ready and available to begin the transfer process.

□ Buyer's Application								
		Have your buyer complete and the attached loan application						
□ Sel	ler'	s Information Worksheet						

Complete the attached worksheet

□ Registration Documentation

Prepare copies of RV or trailer registration

□ Title Documentation

Prepare copies RV or trailer titles where available

□ Lienholder / Payoff Documentation

☐ If there is an existing loan, prepare copies of loan payment & bank contact documentation

Once you have negotiated the deal, fax or email the documentation and leave the rest of the details to us! Please contact us at:

RVDream / SeaDream Inc. Finance & Insurance

1599 Superior Ave., Suite A4

Costa Mesa, CA 92627 Phone: 1.866.460.0170

Fax: 1.866.460.0180

Website: www.rv-dream.com

Sales Contacts

Eric Vaughan: ericv@seadreaminc.com

Nick Buffa: nickb@seadreaminc.com

Tom Schumacher: toms@seadreaminc.com



BUYER APPLICATION & WORKSHEET

















Make your dream a reality!

If this is an application for joint credit with another person, complete all sections, providing information in the CO-APPLICANT section about the joint applicant. We intend to apply for joint credit. (PLEASE INITIAL)

Credit Application



APPLICANT CO-APPLICANT										ce & ins	111/211101:
SELECT A LOAN TYPE	☐ PRIVAT	E PARTY PURCI	HASE □	DEALE	R / BROK	FR PII	RCHASE		RE-QUALIFY	☐ REFINA	
TELL US ABOUT YOURSELF	- FIGURE	LIAKITIOKE	IASE _	DLALL	K / BROK	LIK F O	KCHASE		CE QUALITY	- KEITHA	NCL
NAME (FIRST, MI, LAST)				DATE	OF BIRTH	S	OCIAL SE	CURITY#			
MARITAL STATUS		DRIVERS LICENS	SE#	HOUS	ING			MONTHLY F	IOUSING PAYMI	ENT	
☐ MARRIED ☐ UNMARRIED ☐	SEPARATED				OWN		RENT				
STREET ADDRESS			CITY		STATE	ZIP C	ODE	PHONE			# OF YEARS
OTDEET ADDRESS			O/T) /		07475	710.0	005	DUONE			# 05 \/5 A D 0
STREET ADDRESS (To Cover 5 Years)			CITY		STATE	ZIP C	ODE	PHONE			# OF YEARS
EMAIL ADDRESS			FAX				CELL / OTHE	=D			
ENVILE ABBITCHESS			1700					OLLE / OTTI			
NAME OF EMPLOYER		ADDRESS / ZIP C	P CODE					PHONE			# OF YEARS
POSITION		1	MONTHLY SALARY					HAVE YOU EVER FILED FOR BANKRUPTCY ?			
								□ NO □ YES DATE:			
PREVIOUS EMPLOYER (To Cover 5 Years)		ADDRESS / ZIP C	ODE					PHONE			# OF YEARS
TELL US ABOUT CO-APPLICANT NAME (FIRST, MI, LAST)				DATE	OF BIRTH	le/	OCIAL SE	CURITY#			
NAME (FIRST, MI, LAST)				DATE	OFBIRTH	30	OCIAL SE	CURITY#			
MARITAL STATUS		DRIVERS LICENS	SE #	HOUS	ING			MONTHLY F	IOUSING PAYMI	ENT	
☐ MARRIED ☐ UNMARRIED ☐	SEPARATED	51.172110 2.102110	,_ ,,		OWN		RENT				
STREET ADDRESS		I.	CITY		STATE	ZIP C	ODE	PHONE			# OF YEARS
STREET ADDRESS (To Cover 5 Years)			CITY		STATE	ZIP C	ODE	PHONE			# OF YEARS
EMAIL ADDRESS			FAX					CELL / OTHER			
NAME OF THE OVER		IADDDEGG (ZID G	000					DUONE			# OF YEARS
NAME OF EMPLOYER		ADDRESS / ZIP C	ODE					PHONE			# OF YEARS
POSITION			MONTHLY SALARY					HAVE YOU EVER FILED FOR BANKRUPTCY ?			
									YES	DATE:	
PREVIOUS EMPLOYER (To Cover 5 Years)		ADDRESS / ZIP C	ODE					PHONE			# OF YEARS
PERSONAL REFERENCE											
NAME (FIRST, MI, LAST)				PHON	IE						
TELL US ABOUT YOUR RV		have					10051				
PURCHASE NEW YEAR		MAKE				IM	IODEL				
☐ USED TYPE		FUEL TYPE	lien	IGTH	HORSE	POWER	>	MILEAGE	=		
TRAVEL	TH WHEEL	GAS DI		.0111	HOROLI	OWE	`	IVIIEE/ (OI	_		
SELLER'S NAME		PHONE			FAX				EMAIL ADDRES	SS	
FINANCING WORKSHEET									•		
TOTAL SELLING PRICE ON RV						\$					
TOTAL SELEMO FRIEL ON RV						• <u> </u>					_
DOWN PAYMENT CASH DOWN PAYMENT		á	,								
TRADE-IN ALLOWANCE \$		_				-					
TRADE IN PAYOFF \$ NET TRADE IN		_	:								
TOTAL DOWN PAYMENT		`	<u> </u>			\$					_
LOAN REQUEST (APPROXIMATE)						\$					
Evidence of physical damage insurance on the co	ollateral securing the	loan you seek is room	red prior to closin	na Rveuh	mitting this on		I VOII are a	ithorizing us to	disclose information	contained in your	_
application to an insurance carrier solely for the purp	pose of providing you	with a premium quote	for such insuran	ce. You ar	e, however, u	nder no	obligation v	vhatsoever to pu	rchase insurance fr	om the insurance	
carrier providing the quote. If you do not want us to sentence.	disclose personal in	tormation from your ap	plication to an ins	surance ca	rrier in order to	o provide	e you with a	quote, place yo	ur initials in the box	to the side of this	
All applicants and co-applicants: In submitting th	is application, you w	arrant and represent th	nat the information	n that you a	are furnishing	is truthfu	ul. accurate.	and supplied vo	oluntarily. You auth	orize us to check your	
credit and employment histories and bank and person	onal references, to ol	otain consumer reports	from consumer s	spending a	gencies in cor	nsidering	this applic	ation and subse	quently in connection	on with any update,	
renewal, extension of credit, review or collection of y not it is approved. You agree to notify the creditor of			experience with t	us, to answ	rei questions a	about yo	ur creat ex	penence with us	, and to keep this a	pplication whether or	
	_										
											_
APPLICANT SIGNATURE		DATE	CO-	APPLIC/	ANT SIGNAT	IURE				DATE	

RVDREAM CONTACT INFORMATION Please fax completed credit application to (866) 460-0180

MAILING ADDRESS 1599 Superior Ave. Suite A4 Costa Mesa, CA 92627 If you would like to speak with us directly, please call (866) 460-0170



Seller's Worksheet

Seller's Contact Information

Ocher 3 Contact information								
First Name:		 		· · · · · · · · · · · · · · · · · · ·				
Street Address:								
❖ City, State, Zip Code:								
Phone Number:								
Email Address:								
Social Security Number:								
Collateral Information								
<u>Year</u>	<u>Make</u>	<u>Model</u>	Serial #					
RV:		· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·				
Motor:								
Class: Mileage: Fuel Type:								
Lienholder Information								
Bank Name:								
Street Address:								
Phone Number:								
Account Number:								
	Last Name: Street Address: City, State, Zip Code: Phone Number: Email Address: Social Security Number Year RV: Motor: Trailer: Class: Bank Name: Street Address: City, State, Zip Code: Phone Number:	First Name: Last Name: Street Address: City, State, Zip Code: Phone Number: Email Address: Social Security Number: Collateral Year Make RV: Motor: Trailer: Class: Mileage: Lienholde Bank Name: Street Address: City, State, Zip Code: Phone Number:	First Name: Last Name: Street Address: City, State, Zip Code: Phone Number: Email Address: Social Security Number: Collateral Information Year Make Model RV: Motor: Trailer: Class: Mileage: F Lienholder Information Street Address: City, State, Zip Code: Phone Number:	First Name: Last Name: Street Address: City, State, Zip Code: Phone Number: Email Address: Social Security Number: Collateral Information Year Make Model Serial # RV: Motor: Trailer: Class: Mileage: Fuel Type: Lienholder Information Bank Name: Street Address: City, State, Zip Code: Phone Number:				