

**AUTHORIZATION TO ATTORNEY GENERAL, STATE OF OHIO,
FOR THE RELEASE OF CONSUMER COMPLAINTS TO THE
OHIO AUTOMOBILE DEALERS ASSOCIATION**

Notwithstanding the provisions of the Ohio Revised Code, section 1345.05(A)(7),
_____ (Dealership), hereby authorizes and
consents to the disclosure and release of consumer complaints from the Attorney General, State of
Ohio, to authorized Representatives of the Ohio Automobile Dealers Association for the purposes of
the dealership's participation in the Automotive Consumer Action Program (AUTOCAP) sponsored
by said Association. This waiver and authorization shall be effective until otherwise notified in
writing.

DATE: _____

NAME OF DEALERSHIP: _____

DEALERSHIP ADDRESS: (Please include City, State, & Zip Code) _____

DEALERSHIP TELEPHONE NUMBER: _____

DEALERSHIP FAX NUMBER: _____

AUTHORIZED DEALERSHIP REPRESENTATIVE(S), NAME AND TITLE: _____

As a participating dealer, I agree to abide by all policies and procedures of the AUTOCAP program. I
also understand and agree that all decisions rendered by the AUTOCAP Panel are binding upon the
dealership. Should the dealership choose not to comply with a decision of the Panel, the case will be
referred to the Attorney General and the dealership will be precluded from further participation in the
AUTOCAP program.

AUTHORIZED SIGNATURE: _____