

**ANCHOR FOR SPECIAL NEEDS, INC.  
VEHICLE PURCHASE INFORMATION SHEET**

Please note that ALL vehicle purchases must be approved by the Trust Administrator PRIOR to taking possession of the vehicle.  
The purchase of a vehicle may take up to 10 business days for processing.

*I am interested in purchasing the following vehicle:*

**Vehicle Information:**

Make (Chevy, Ford, etc.) \_\_\_\_\_ Model (Corolla, Malibu, etc.) \_\_\_\_\_  
Year \_\_\_\_\_ Color \_\_\_\_\_  
Mileage \_\_\_\_\_ Cost \_\_\_\_\_

**Seller's Information:**

Dealer Name \_\_\_\_\_  
Salesperson's Name (or owner if private sale) \_\_\_\_\_  
Address \_\_\_\_\_  
\_\_\_\_\_  
Phone Number \_\_\_\_\_

Please attach a copy of the vehicle Seller's Bill of Sale, Purchase Order or Sales Agreement with the completed form.

***Incomplete forms will not be processed and will be returned to the beneficiary.***

*(Beneficiary is the person for whose benefit the trust has been established.)*

Name of Beneficiary (please print)	Phone Number
Signature of Beneficiary/POA/Guardian/Designee	Date

**Incomplete forms will be returned to the beneficiary.**

**FAX, EMAIL OR MAIL YOUR REQUEST**

**FAX: 1-267-740-3000 | PHONE: 1-844-526-2467 | EMAIL: [info@anchorfsn.org](mailto:info@anchorfsn.org)**

**MAIL: Anchor for Special Needs, Inc. | 8190-A Beechmont Avenue, PO Box 301 | Cincinnati, Ohio 45255**

**YOU MAY MAKE COPIES OF THIS FORM OR DOWNLOAD IT FROM OUR WEBSITE [www.anchorfsn.org](http://www.anchorfsn.org)**

*For internal use only.*

Approved by \_\_\_\_\_ Date \_\_\_\_\_ *Rev. 03/07/2018*