

Toyota South Atlanta

Date: **12/12/2025**

Manager: _____

FOR INTERNAL USE ONLY**CUSTOMER**

Address : _____ Home Phone : _____
E-Mail : _____ Work Phone : _____
Cell Phone : _____

VEHICLE

Stock # : **S146ER57** New / Used : **New** VIN : **JTMRWRFV4SJ090988** Mileage: **0**
Vehicle : **2025 Toyota RAV4 Hybrid** Color : **Midnight Black**
Type : **XLE (CVT) 4dr All-Wheel Drive4444**
Body Size : _____ Style : _____ Weight : **0** Unit Class : _____

Market Value Selling Price	36,708.00
Discount	2,562.56
Adjusted Price	34,145.44
Doc Fee	998.00
ETR Fee	298.00
GATAVT	2,480.90
Title Fee	18.00
MVWRA	3.00
License Fee	20.00
Balance	37,963.34

Customer Approval: _____ Management Approval: _____

By signing this authorization form, you certify that the above personal information is correct and accurate, and authorize the release of credit and employment information. By signing above, I provide to the dealership and its affiliates consent to communicate with me about my vehicle or any future vehicles using electronic, verbal and written communications including but not limited to eMail, text messaging, SMS, phone calls and direct mail. Terms and Conditions subject to credit approval. For Information Only. This is not an offer or contract for sale.