



LOUISIANA USED MOTOR VEHICLE COMMISSION

3132 Valley Creek Drive
Baton Rouge, Louisiana 70808
MAIN# (225) 925-3870 FAX # (225) 925-3869
www.lumvc.louisiana.gov

FOR OFFICE USE ONLY

Current License #

R#
Dealer #
SM #
Date Issued

APPLICATION FOR SALESPERSON'S LICENSE FOR YEAR 20

INITIAL **RENEWAL**

PLEASE PRINT OR TYPE. Complete entire application and attach such documents as required. Any misrepresentation or omission of information shall be grounds for refusal to issue or revocation of a Salesperson License. **SALESPERSON LICENSE FEE IS \$25.00.**

SECTION ONE: INDIVIDUAL INFORMATION

LAST NAME		FIRST NAME		MI	SOCIAL SECURITY #	
RESIDENCE ADDRESS		CITY	STATE	ZIPCODE		DATE OF BIRTH mm/dd/yyyy
HOME TELEPHONE	CELLULAR PHONE	EMPLOYMENT DATE	DRIVER'S LICENSE #		RACE	GENDER
U.S. CITIZEN? <input type="checkbox"/> YES <input type="checkbox"/> NO IF NO, ATTACH COPY OF RESIDENT ALIEN CARD (FRONT AND BACK) AND DRIVER'S LICENSE.						

SECTION TWO: DEALERSHIP INFORMATION

DEALERSHIP NAME	DEALERSHIP ADDRESS	CITY	ZIPCODE
DEALER LICENSE #	TELEPHONE	PARISH	

SECTION THREE: GENERAL INFORMATION

- HAVE YOU EVER APPLIED FOR A SALESPERSON LICENSE THAT WAS DENIED?
 - YES; IF YES, GIVE DATE(S): _____
 - NO
- HAVE YOU EVER HELD A DEALER OR SALESPERSON LICENSE THAT WAS DENIED, SUPSENDED, OR REVOKED?
 - YES; IF YES, GIVE DEALERSHIP NAME AND DATE: _____
 - NO
- ARE YOU RELATED TO ANYONE FROM THE USED CAR INDUSTRY WHOSE LICENSE HAS BEEN DENIED, SUSPENDED, OR REVOKED?
 - YES; IF YES, GIVE NAME(S): _____
 - NO
- HAVE YOU EVER ATTENDED THE 4 HOUR EDUCATIONAL SEMINAR?
 - YES; IF YES, GIVE DATE: _____
 - NO
- ARE YOU GOING TO DRIVE ANY OF THE VEHICLES ON OR OFF THE LOT?
 - YES
 - NO

SECTION FOUR: EMPLOYMENT HISTORY

HAVE YOU EVER HAD A PREVIOUS DEALER OR SALESPERSON LICENSE?

- YES; IF YES, COMPLETE THE FOLLOWING:
- NO

NAME OF DEALERSHIP	DEALERSHIP ADDRESS	DATES OF LICENSE

SECTION FIVE: BACKGROUND HISTORY

HAVE YOU EVER BEEN CONVICTED OR PLED GUILTY TO ANY CRIME OTHER THAN A TRAFFIC VIOLATION WITHIN THE PAST TEN (10) YEARS?

- YES; IF YES, DATE OF CONVICTION _____ OFFENSE _____
- NO

NOTE: IF YES, YOU MUST SUBMIT AN ADDITIONAL FEE OF \$35.00 FOR A CRIMINAL BACKGROUND CHECK.

ATTESTATION

I HEREBY CERTIFY THAT THE STATEMENTS MADE HEREIN ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF THAT I AM FAMILIAR AND WILL ABIDE WITH THE PROVISIONS OF ALL THE LAWS, RULES AND REGULATIONS UNDER WHICH THIS APPLICATION IS MADE.

ANY FALSE ANSWER IS A CRIMINAL OFFENSE SUBJECT TO A FINE NOT TO EXCEED \$5,000.00 OR IMPRISONMENT NOT TO EXCEED 4 YEARS OR BOTH.

SIGNATURE OF APPLICANT

DATE mm/dd/yyyy

SIGNATURE OF OWNER

DATE

PURSUANT TO THE AMERICANS WITH DISABILITIES ACT, ASSISTANCE WILL BE PROVIDED IN COMPLETING ANY FORMS REQUIRED BY THE LOUISIANA USED MOTOR VEHICLE COMMISSION.