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

Current License #
Current License #

FOR OFFICE USE ONLY

R#
License #
Date Issued

APPLICATION FOR DEALER 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 license.

SECTION ONE: DEALERSHIP INFORMATION

DEALERSHIP NAME			BUSINESS PHONE
PHYSICAL ADDRESS	CITY	ZIPCODE	PARISH
MAILING ADDRESS	CITY	ZIPCODE	PARISH
EMAIL ADDRESS	OFFICE HOURS		DAYS

SECTION TWO: TYPE OF LICENSE(S) AND TYPE OF BUSINESS

CHECK THE TYPE OF LICENSE YOU ARE APPLYING FOR. YOU MUST SUBMIT THE CORRECT AMOUNT FOR EACH LICENSE TYPE. EACH ADDITIONAL LICENSE TYPE REQUIRES AN ADDITIONAL FEE. CHECK EACH TYPE OF BUSINESS YOU PLAN ON OPERATING.

☐ USED DEALERS LICENSE **($400.00 FEE)**
- ☐ USED CARS AND TRUCKS
- ☐ USED BOATS
- ☐ USED BOAT MOTORS
- ☐ USED TRAILERS
- ☐ USED MOTORCYCLES
- ☐ USED MOTORHOMES
- ☐ BROKER
- ☐ USED ATV/OFF ROAD
- ☐ BUSES/FIRETRUCKS/WRECKERS

☐ AUCTION ($400 FEE)
- ☐ PUBLIC
- ☐ WHOLESALE (DEALER)
- ☐ SALVAGE

☐ USED PARTS & ACCESSORIES ($400 FEE)

☐ CRUSHER ($400 FEE)

☐ AUTOMOTIVE DISMANTLER & PARTS RECYCLER ($400 FEE)

☐ DAILY RENTAL **($400 FEE)**
- ☐ USED CARS AND TRUCKS
- ☐ USED BOATS
- ☐ USED BOAT MOTORS
- ☐ USED TRAILERS
- ☐ USED MOTORCYCLES
- ☐ USED MOTORHOMES
- ☐ BROKER
- ☐ USED ATV/OFF ROAD

☐ RENT WITH THE OPTION TO PURCHASE ($400 FEE)
- ☐ USED CARS AND TRUCKS
- ☐ USED BOATS
- ☐ USED BOAT MOTORS
- ☐ USED TRAILERS
- ☐ USED MOTORCYCLES
- ☐ USED MOTORHOMES
- ☐ BROKER
- ☐ USED ATV/OFF ROAD

SECTION THREE: TYPE OF OWNERSHP

CHECK ONLY ONE

☐ SOLE PROPRIETOR ☐ CORPORATION (CORP) ☐ LIMITED LIABILITY COMPANY (LLC)
☐ PARTNERSHIP ☐ LIMITED PARTNERSHIP (LP) ☐ LIMITED LIABILITY PARTNERSHIP (LLP)

ENTITY NAME (IF APPLICABLE) _____

SECTION FOUR: OWNERSHIP INFORMATION

COMPLETE THE FOLLOWING SECTION INDICATING ALL PARTIES WITH ANY OWNERSHIP INTEREST IN THE BUSINESS. YOU MAY INCLUDE ADDITONAL SHEETS IF NECESSARY.

NAME OF PERSON _____ DATE OF BIRTH mm/dd/yyyy _____ SOCIAL SECURITY # _____

HOME ADDRESS _____ TELEPHONE _____ DRIVER'S LICENSE # _____

U.S. CITIZEN? _____YES _____NO (IF NO, ATTACH COPY OF RESIDENT ALIEN CARD (FRONT & BACK) AND DRIVER'S LICENSE

NAME OF PERSON _____ DATE OF BIRTH mm/dd/yyyy _____ SOCIAL SECURITY # _____

HOME ADDRESS _____ TELEPHONE _____ DRIVER'S LICENSE # _____

U.S. CITIZEN? _____YES _____NO (IF NO, ATTACH COPY OF RESIDENT ALIEN CARD (FRONT & BACK) AND DRIVER'S LICENSE

SECTION FIVE: BACKGROUND INFORMATION

HAVE ANY OF THE APPLICANTS LISTED IN SECTION FOUR EVER BEEN CONVICTED OR PLED GUILTY OF A FELONY OTHER THAN A TRAFFIC VIOLATION WITHIN THE PAST TEN (10) YEARS?

- ☐ YES
- ☐ NO

IF YES, COMPLETE THE FOLLOWING (ATTACH ADDITIONAL SHEET IF NEEDED)

INDIVIDUAL NAME: _____ DATE OF CONVICTION_____ OFFENSE _____

INDIVIDUAL NAME: _____ DATE OF CONVICTION_____ OFFENSE _____

INDIVIDUAL NAME: _____ DATE OF CONVICTION_____ OFFENSE _____

SECTION SIX: GENERAL INFORMATION

1. **HAVE YOU OR ANY AFFILIATED OWNERS EVER BEEN KNOWN BY AND/OR USED ANY NAME(S) OTHER THAN THE NAME(S) APPEARING ON THIS APPLICATION?**
   - ☐ YES; IF YES, GIVE NAMES. _____
   - ☐ NO
2. **HAVE YOU OR ANY AFFILIATED OWNERS EVER BEEN LICENSED AS A DEALER OR SALES t9w{hb IN LOUISIANA?**
   - ☐ YES; IF YES, GIVE NAME, DEALERSHIP NAME, AND DATE: _____
   - ☐ NO
3. **HAVE YOU OR ANY AFFILIATED OWNERS EVER HAD A PREVIOUS DEALER OR SALES t9w{hb LICENSE THAT WAS DENIED, SUSPENDED, OR REVOKED?**
   - ☐ YES; IF YES, GIVE NAME, DEALERSHIP NAME, AND DATE: _____
   - ☐ NO
4. **ARE YOU OR ANY AFFILATED OWNERS RELATED TO ANYONE FROM THE USED CAR INDUSTRY WHOSE LICENSE HAS BEEN DENIED, SUSPENDED, OR REVOKED?**
   - ☐ YES; IF YES, GIVE NAME AND THEIR DEALERSHIP NAME: _____
   - ☐ NO
5. **DO YOU PRESENTLY SELL EXTENDED WARRANTY CONTRACTS OR PRODUCT WARRANITIES?**
   - ☐ YES; IF YES, NAME OF COMPANY:_____DATE OF APPROVAL: _____
   - ☐ NO
6. **DO YOU HOLD A FINANCE LICENSE?**
   - ☐ YES; IF YES, GIVE NAME: _____ FINANCE NUMBER: _____
   - ☐ NO
7. **HAS A REPRESENTIVE OF THE DEALERSHIP COMPLETED THE 4 HOUR EDUCATIONAL SEMINAR?**
   - ☐ YES; IF YES,GIVE DATE: _____
   - ☐ NO; IS REPRESENTIVE SCHEDULED FOR SEMINAR? GIVE DATE: _____
8. **DATE THIS BUSINESS WAS ESTABLISHED:** _____

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 REGUALTIONS UNDER WHICH THIS APPLICATION IS MADE.

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

_____

PRINT NAME

_____ _____

SIGNATURE AND TITLE **DATE** mm/dd/yyyy

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