



LOUISIANA USED MOTOR VEHICLE COMMISSION

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Baton Rouge, Louisiana 70808
MAIN# (800) 256-2977 or (225) 925-3870
FAX # (225) 925-3869
www.lumvc.louisiana.gov

FOR OFFICE USE ONLY

Current License #
SM.

Form with fields: 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 Salesman License. SALESPERSON LICENSE FEE IS \$25.00.

SECTION ONE: INDIVIDUAL INFORMATION

Form with fields: LAST NAME, FIRST NAME, MI, SOCIAL SECURITY #, RESIDENCE ADDRESS, CITY, STATE, ZIPCODE, DATE OF BIRTH, HOME TELEPHONE, CELLULAR PHONE, EMPLOYMENT DATE, DRIVER'S LICENSE #, RACE, GENDER, U.S. CITIZEN?, EMAIL ADDRESS

SECTION TWO: DEALERSHIP INFORMATION

Form with fields: DEALERSHIP NAME, DEALERSHIP ADDRESS, CITY, ZIPCODE, DEALER LICENSE #, TELEPHONE, PARISH

SECTION THREE: GENERAL INFORMATION

- 1. HAVE YOU EVER APPLIED FOR A SALESMAN LICENSE THAT WAS DENIED?
2. HAVE YOU EVER HELD A DEALER OR SALESMAN LICENSE THAT WAS DENIED, SUSPENDED, OR REVOKED?
3. ARE YOU RELATED TO ANYONE FROM THE USED CAR INDUSTRY WHOSE LICENSE HAS BEEN DENIED, SUSPENDED, OR REVOKED?
4. HAVE YOU EVER ATTENDED THE 4 HOUR EDUCATIONAL SEMINAR?
5. ARE YOU GOING TO DRIVE ANY OF THE VEHICLES ON OR OFF THE LOT?

SECTION FOUR: EMPLOYMENT HISTORY

HAVE YOU EVER HAD A PREVIOUS DEALER OR SALESMAN LICENSE?
YES; IF YES, COMPLETE THE FOLLOWING:
NO

Table with 3 columns: NAME OF DEALERSHIP, DEALERSHIP ADDRESS, DATES OF LICENSE

SECTION FIVE: BACKGROUND HISTORY

HAVE YOU EVER BEEN CONVICTED OR PLED GUILTY OF A FELONY 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 \$50.00 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 mm/dd/yyyy

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