

Current Dealer No. \_\_\_\_\_

STATE OF LOUISIANA  
**RECREATIONAL AND USED MOTOR VEHICLE COMMISSION**  
3132 VALLEY CREEK DRIVE  
BATON ROUGE, LOUISIANA 70808  
(225) 925-3870 FAX # (225) 925-3869  
www.lrumvc.louisiana.gov

RECEIPT NO.
R#
LICENSE NO.
MA -
DATE ISSUED

**APPLICATION FOR LICENSE AS MOTORCYCLE AND ATV DEALER FOR YEAR 20\_\_\_\_\_**

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 Motorcycle and ATV Dealer's License. Any false answer shall be subject to a fine not to exceed \$5,000.00 or imprisonment not to exceed 4 years of both.

OWNERSHIP NAME \_\_\_\_\_  
(NAME OF INDIVIDUAL, PARTNERSHIP, CORPORATION, LLC, or LLP)

DEALERSHIP NAME \_\_\_\_\_ PHONE (\_\_\_\_) \_\_\_\_\_  
(NAME UNDER WHICH BUSINESS WILL BE CONDUCTED) (NO CELLULAR PHONES ALLOWED)

FAX (\_\_\_\_) \_\_\_\_\_

OFFICE HOURS \_\_\_\_\_ DAYS \_\_\_\_\_

BUSINESS LOCATION \_\_\_\_\_ CITY \_\_\_\_\_ PARISH \_\_\_\_\_ ZIP \_\_\_\_\_

MAILING ADDRESS (if different from above) \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_

**A SEPARATE APPLICATION MUST BE SUBMITTED FOR EACH LOCATION**

Indicate by (X) in the applicable block shown below for the type of business you are engaged in. If several types apply to your business, although it is one combined operation, each applicable block must be checked.

**I (WE) ENGAGE IN THE FOLLOWING BUSINESS:**

	USED	NEW	MANUFACTURER	BRAND NAME
MOTORCYCLES	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
ATV	<input type="checkbox"/>	<input type="checkbox"/>	_____	_____
			_____	_____
			_____	_____

**OWNERSHIP INFORMATION:**

NAME \_\_\_\_\_ TITLE \_\_\_\_\_ HOME PHONE \_\_\_\_\_  
(INDICATE INDIVIDUAL, MANAGING PARTNER OR PRESIDENT OF CORPORATION)

CELLULAR PHONE \_\_\_\_\_

HOME ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP \_\_\_\_\_

DRIVER'S LICENSE # \_\_\_\_\_ SOCIAL SECURITY # \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_

U.S. CITIZEN? YES  NO  **IF NOT A U.S. CITIZEN, ATTACH COPY OF RESIDENT ALIEN CARD (FRONT AND BACK) AND DRIVER'S LICENSE.**

YES  NO

1. HAVE YOU EVER BEEN CONVICTED OR PLED GUILTY TO ANY CRIME OTHER THAN A TRAFFIC VIOLATION IN THE PAST 10 YEARS? IF YES, STATE INDIVIDUAL'S NAME, OFFENSE, DATE OF OFFENSE AND WHERE \_\_\_\_\_

2. DO YOU PRESENTLY SELL EXTENDED WARRANTY CONTRACTS OR PRODUCT WARRANTIES? IF YES, NAME OF COMPANY AND DATE OF APPROVAL \_\_\_\_\_

3. DO YOU POSSESS A FINANCE LICENSE? IF YES, GIVE NAME AND # \_\_\_\_\_

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

DEALERSHIP SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
(INDICATE INDIVIDUAL, MANAGING PARTNER, PRESIDENT OF CORPORATION OR DULY AUTHORIZED REPRESENTATIVE)

SWORN TO AND SUBSCRIBED BEFORE ME THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_\_\_\_

NOTARY PUBLIC SIGNATURE/COMMISSION STAFF \_\_\_\_\_

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

**SEE OTHER SIDE**

ATTACH CHECK TO COVER \$200.00 FOR DEALER, \$25.00 FOR EACH SALESMAN. MAKE CHECK PAYABLE TO: LOUISIANA RECREATIONAL AND USED MOTOR VEHICLE COMMISSION.

ATTACH CHECK FOR \$35.00 TO COVER CRIMINAL RECORD CHECK, IF APPLICABLE.

MAIL COMPLETED FORM, SALESMAN APPLICATION(S), FEES AND ATTACHMENTS TO THE ADDRESS ON FRONT OF THIS APPLICATION.

LRUMVC-151 (06/07)