



## Statement of Financial Condition

**Instructions: A financial statement is required for each owner, partner, corporate member or LLC member. If filing as a corporation or an LLC a separate financial statement is required. Please do not mix personal assets and liabilities with the corporation or LLC.**

This Statement Is For (Check One)  
 Individual     Corporate or LLC. Member     Corporation     Ltd. Liab. Co.     Ltd. Liab. Partnership

**This Section is to be Completed by All Applicants**

Individual Name \_\_\_\_\_

**This Section is to be Completed by Corporation and Limited Liability Company Applicants**

Corporate/Company Name \_\_\_\_\_

**This Section is to be Completed by All Applicants**

Assets	In Dollars (Omit Cents)	Liabilities	In Dollars (Omit Cents)
Cash in Following Banks ( <b>Submit Bank Statement</b> )		Real Estate Mortgages ( <b>See Schedule E</b> )	
Bank Name:			
Bank Name:		Automobile Loans ( <b>See Schedule F</b> )	
Bank Name:			
Bank Name:		Credit Card Payable ( <b>See Schedule G</b> )	
Marketable Securities ( <b>See Schedule A, Submit Statement</b> )		Other Notes Payable ( <b>See Schedule H</b> )	
Non-Marketable Securities ( <b>See Schedule B, Submit Statement</b> )		Income Taxes Due	
Notes Receivable ( <b>See Schedule C</b> )		Other Unpaid Taxes	
Accounts Receivable ( <b>See Schedule D</b> )		Other Debts ( <b>Itemize</b> )	
Real Estate ( <b>See Schedule E, Submit Proof of Ownership</b> )			
Motor Vehicles ( <b>See Schedule F, submit title or registration as verification</b> )			
Other Assets ( <b>Itemize. Do NOT include furniture, appliances, jewelry or collectibles – guns, coins, etc.</b> )			
		<b>Total Liabilities</b>	
<b>Total Assets</b>		<b>Total Assets–Total Liabilities = Total Net Worth</b>	

Do you have any of the following?

1. Contingent liabilities as endorser, comaker or guarantor on any leases or contracts? <input type="checkbox"/> Yes* <input type="checkbox"/> No	3. Contested income or other tax liens? <input type="checkbox"/> Yes* <input type="checkbox"/> No
2. Contingent liabilities in pending legal actions? <input type="checkbox"/> Yes* <input type="checkbox"/> No	4. Outstanding judgments or non-tax liens? <input type="checkbox"/> Yes* <input type="checkbox"/> No
	6. Other special debts or circumstances? <input type="checkbox"/> Yes* <input type="checkbox"/> No

**\*If yes to any of the above, please indicate the amount of the liability and explain on a separate sheet of paper.**

Do you have a line of credit?     Yes     No  
**If yes, indicate amount \_\_\_\_\_ and attach a verification letter from the lending institution.**

The undersigned acknowledges and understands that the Motor Vehicle Dealer Board is relying on the information provided herein in deciding whether to grant or deny a license. The undersigned certifies that the information provided herein is true, correct and complete. The undersigned authorizes the Board and its agents to make all inquires deemed necessary, including credit bureau inquiries, to verify the accuracy of this information and determine the financial fitness of the applicant.

Signature ( <i>owner, partner, LLC member/manager or corporate officer</i> ) _____	Title _____	Date _____
--	-------------	------------

**Form must be completed front and back and net worth requirement must be met. See our website: [www.colorado.gov/revenue/aid](http://www.colorado.gov/revenue/aid) Go to "licensing" section of the website.**

Form must be completed front and back and **net worth requirement** must be met. See our website:  
[www.colorado.gov/revenue/aid](http://www.colorado.gov/revenue/aid) Go to "licensing" section of the website.

**Schedule A – U.S. Government & Marketable Securities (Submit Verification)**

Number of Shares or Face Value of Bonds	Description	In Name of	Registered, Pledged or Held by Others?	Market Value

**Schedule B – Nonmarketable Securities (Submit Verification)**

Number of Shares	Description	In Name of	Market Value**

**Schedule C – Notes Receivable**

Name and Address (Street and City) From Whom Due	Explanation	Dated	Maturity	Amount

**Schedule D – Accounts Receivable**

Name and Address (Street and City) From Whom Due	Explanation	When Sold	When Due	Amount

**Schedule E – Real Estate (Submit Proof of Ownership for Each Property Listed)**

Complete Address & County	Title in Name of	Cost	Date Acquired	Amount Owed	Monthly Payments	Monthly Income	Market Value
<b>Totals</b>							

**Schedule F – Motor Vehicles (Submit Copy of Title or Registration for Every Vehicle Listed)**

Description	Year Mfg'd.	Year Purch.	Purchase Price	Amount Owed	Monthly Payment Amount	Current Wholesale Value
<b>Totals</b>						

**Schedule G – Credit Card Payable**

Company	Current Balance

**Schedule H – Bank and Other Institutional Relationships**

Name and Address of Creditor	Original Loan/Line Amount	Date of Loan	Maturity Date	Secured?***	Monthly Payments	Amount Owed

\*\*\*If yes, list collateral in an attachment.