

Colorado Motor Vehicle Dealer Board TEMPORARY OUT OF STATE DEALER APPLICATION

<p>No temporary license will be issued until the application has been approved by the board or its designee. Submit complete application no later than 45 days prior to the event. Make checks payable to the Colorado Department of Revenue. The AID mailing address is listed at the top of this form. The physical address is: 1697 Cole Blvd., Suite 200-A, Lakewood CO 80401.</p>					
Check One: <input type="checkbox"/> Used Motor Vehicle Dealer (2510) <input type="checkbox"/> Franchised Motor Vehicle Dealer (2500)			Check One: <input type="checkbox"/> Individual <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Limited Liability		
Check One: <input type="checkbox"/> Board Regulated Event <input type="checkbox"/> Other Special Sales Events					
1. Name of Event(s)				Date of Event(s) (MM/DD/YY)	
2. Street Address of Event(s)		City	State	Zip	
3. Name of Applicant (Individual/Partners/LLC/Corporation)				Colorado Sales Tax Number	
4. Current license information on the applicant is as follows:					
Issuing State	License Number		Licensed Name/DBA		
5. My state's licensing authority is:					
Name				Phone Number ()	
Street Address		City	State	Zip	
6. Is the applicant's license in the issuing state currently on probation, administrative hold or pending disciplinary hearing? <input type="checkbox"/> Yes <input type="checkbox"/> No					
A "yes" answer must be explained fully in a separate letter.					
Email Address				Business Phone Number ()	
7. Business Location in State Where Licensed		City	State	Zip	
8. Mailing Address (if different)		City	State	Zip	
9. If franchised, list franchises and attach manufacturer's authorization letter to operate in Colorado at the above event(s)					
10. List all owners, partners, members, or stockholders and the company ownership percentage of each below. (Use additional paper if necessary.)					
Last Name		First Name		Middle Initial	Home Telephone ()
Street Address		City	State	Zip	
Last Name		First Name		Middle Initial	Home Telephone ()
Street Address		City	State	Zip	

11. In the past 10 years have you been arrested or charged with, convicted of or pled no contest to any felony or misdemeanor or crime excluding traffic violations? Yes No

If "Yes" give full details including: type felony/misdemeanor, charges offense details, date and location of convictions, sentence received, current status (release, probation, parole), etc. Please attach additional pages if needed.

12. Has the applicant, any partner, LLC member or manager, corporate stockholder, director or officer of said applicant ever:

a. Had a motor vehicle dealer's or salesperson's license subjected to denial or disciplinary action? Yes No

b. Had any other type of occupational license (excluding driver's license) subjected to denial or disciplinary action? Yes No

c. Filed or been declared bankrupt? Yes No

Any "yes" answer above must be explained fully in a separate letter.

13. List the full legal names of all owners and employees of the applicant, who will be selling at the event. (Please list additional names on separate sheet.)

Last Name	First Name	Middle Initial
SSN	Date of Birth	
Last Name	First Name	Middle Initial
SSN	Date of Birth	

I have read and know the contents of this application. I declare under penalty of perjury in the second degree that the statements and information in this application are true and correct. I agree to conform to all laws and the Colorado Motor Vehicle Dealer Board Regulations. I understand that a temporary dealer's license is valid only for the official dates of the event. I understand that my event premises and records are subject to inspection by Board investigators and agents. The temporary license for the event must be available at the event. I hereby appoint the Executive Secretary of the Dealer Board as my true and lawful agent for the service of process in any action, which may be hereafter commenced against me on any claim for damages alleged to have been suffered by any person by reason of the violation of any terms and provisions of Dealer Law or any condition of the applicant's bond.

Signature	Title
Print Name	Date (MM/DD/YY)

For Official Use Only

Board Action <input type="checkbox"/> Approved <input type="checkbox"/> Denied	Date (MM/DD/YY)	Temporary Dealer Number	Date Issued (MM/DD/YY)	Fee Required & Submitted \$.00
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