

Motor Vehicle Dealer Board Dealer/Wholesale License Application Addendum

Instructions: A DR 2109-B must be completed for each owner, partner, LLC member, or manager, corporate stock holders, director, or officer.

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|--|----------------------------|------------------------|-----------------|---------------|
| Name (Please Print) | Date of Birth | Social Security Number | Email | |
| Title (Check Appropriate Box): <input type="checkbox"/> Owner <input type="checkbox"/> Partner <input type="checkbox"/> President <input type="checkbox"/> Vice President <input type="checkbox"/> Sec./Treasurer <input type="checkbox"/> Manager/Member <input type="checkbox"/> Stockholders | | | | |
| 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? <input type="checkbox"/> Yes <input type="checkbox"/> 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. | | | | |
| Date | City, County, State | Offense | Sentence | Status |
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| Have you ever: Had a motor vehicle dealer or salesperson's license application or license subjected to denial, or disciplinary action? <input type="checkbox"/> Yes <input type="checkbox"/> No Filed or been declared bankrupt in the past 5 years? <input type="checkbox"/> Yes <input type="checkbox"/> No Any yes answer must be explained fully in a separate letter signed and dated. | | | | |
| Had any other type of occupational license application or license (excluding driver license) subjected to denial or disciplinary action? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes give full details and attach additional pages if needed. | | | | |
| Do you have a financial interest in any motor vehicle dealer's license in this state or any other state? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes , provide dealer name, license number and state. | | | | |
| Do you have ownership of 1% or more financial interests in any manufacturer in this state or any other state? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes , provide manufacturer name, license number and state. | | | | |
| I declare under penalty of perjury in the second degree that the statements made on this application are true and complete to the best of my knowledge. | | | | |
| Signature | | | | Date |