

Manufacturer/Distributor License Application

All applicants must complete this application and submit with the appropriate fee to the above address.
Manufacturer and distributor applicants must provide the following:

Manufacturer <input type="checkbox"/> All written warranties or a statement that none are provided. <input type="checkbox"/> A certified copy of the standard written agreement with dealers. <input type="checkbox"/> A copy of the delivery and preparation obligations of dealers. <input type="checkbox"/> A copy of the manufacturer's certificate of origin (MCO). <input type="checkbox"/> A DR 4679 for all individuals or partners. <input type="checkbox"/> A copy of verifiable ID to prove lawful presence for all individuals or partners. <input type="checkbox"/> A copy of statement of foreign authority which has been filed with the Colorado Secretary of State's office. Visit the Colorado Secretary of State's Website at www.sos.state.co.us Manufacturers and Distributors must provide immediate notification to the Auto Industry Division of the appointment and/or termination of franchised dealers as well as the addition of new makes.	Distributor <input type="checkbox"/> All written warranties or a statement that none are provided. <input type="checkbox"/> A certified copy of the standard written agreement with dealers. <input type="checkbox"/> A copy of the delivery and preparation obligations of dealers. <input type="checkbox"/> A copy of the manufacturer's certificate of origin (MCO). <input type="checkbox"/> Distributor agreement with the manufacturer. <input type="checkbox"/> Name of manufacturer. <input type="checkbox"/> Colorado manufacturer license number. <input type="checkbox"/> A DR 4679 for all individuals or partners. <input type="checkbox"/> A copy of verifiable ID to prove lawful presence for all individuals or partners. <input type="checkbox"/> A copy of statement of foreign authority which has been filed with the Colorado Secretary of States office.				
Check One: <input type="checkbox"/> Manufacturer (2540) <input type="checkbox"/> Distributor (2544) <input type="checkbox"/> Powersport Vehicle Manufacturer (2610) <input type="checkbox"/> Powersport Vehicle Distributor (2612)					
Check One: <input type="checkbox"/> Individual <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Limited Liability Company <input type="checkbox"/> Limited Liability Partnership					
Name of Applicant (Individual/Partners/Corporation/LLC/LLP)					
Federal ID Number					
Colorado Manufacturer Number					
Trade Name	Email Address	Business Phone	Fax Number		
Business Street Address		City	State ZIP		
Mailing Address (if different)		City	State ZIP		
Name of Contact Person		Fax Number	Phone / Cell Number		
List all owners, partners, members, or stockholders and their percentage of ownership in the business (must equal 100%.) Attach additional paper if necessary.					
Full Name	Date of Birth	Home Address (Street, City, State, ZIP)	Social Security #	Home Phone	% Owned
Type of Vehicles Manufactured or Distributed in Colorado: <input type="checkbox"/> Car <input type="checkbox"/> Truck <input type="checkbox"/> Motorcycle <input type="checkbox"/> Motor Home <input type="checkbox"/> Trailer <input type="checkbox"/> Dirtbike <input type="checkbox"/> All Terrain Vehicle <input type="checkbox"/> Snowmobiles <input type="checkbox"/> Personal Watercraft <input type="checkbox"/> Other (name and description)					
Make of Vehicle Manufactured or Distributed in Colorado					
Name and Dealer License Numbers of Colorado Dealers Authorized to Sell Your Motor Vehicles/Powersports Vehicle					
Only Answer if You Manufacture/Distribute ATV'S. Do the all terrain vehicles you manufacture/distribute meet the American National Standards Institute/Specialty Vehicle Institute of America 2001 standards for four wheel all terrain vehicles equipment <input type="checkbox"/> Yes <input type="checkbox"/> No					
Can each individual or partner provide proof of lawful US presence? <input type="checkbox"/> Yes <input type="checkbox"/> No					
Please review emergency rules in order to understand what constitutes "Proof of Lawful Presence." www.colorado.gov/revenue/aid See Licensing section. I hereby appoint the following as my true and lawful agent for the service of process in the State of Colorado 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 of the terms and provisions of Article 6, Title 12, C.R.S. (The administrator of the Department of Revenue, State of Colorado may be appointed as the agent for service of process in the State of Colorado.)					
Name				Telephone Number	
Address		City		State	ZIP
All Applicants					
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 and that I have authority as the owner, a member of the copartnership or as an agent of the corporation to sign this application.					
Signature		Printed Name		Title	Date
Make check payable to: COLORADO DEPARTMENT OF REVENUE				Fee Submitted \$	
For Official Use Only					
Department's Action: <input type="checkbox"/> Approved <input type="checkbox"/> Denied		Manufacture Number		Date Issued	Fee Submitted \$
Date:					