71

KANSAS DEPARTMENT OF REVENUE DIVISION OF VEHICLES DEALER LICENSING TOPEKA, KANSAS 66626-0001 www.ksrevenue.gov PH # (785)296-3621 FAX (785)296-5854

CHANGE OF RECORD FORM

Please print or type legibly. Additional forms may be needed depending on the change.

D#	Dealer Name		
DBA Addition	n or DBA Name Change		
DBA Remova	al		
DBA			
Phone/Fax/E (Your business)	-	ne and listed with the phone company)	
Business Phon	e		
Fax			
Cell Phone			
Email Address			
wner's Name			
		(Please Print)	
ignature of Owner	r <u>X</u> Signo	nture	_ Date
-		ental Locations must be completed o of the Franchise Agreement. Insurance	

must be submitted in their entirety on appropriate policy forms through their policy carriers.

Any ownership changes must be submitted on the D-23 form and accompanied with all designated documentation.