

**KANSAS DEPARTMENT OF REVENUE
DIVISION OF VEHICLES
TOPEKA, KANSAS 66626-0001**

F# _____

* 62 *

APPLICATION FOR A VEHICLE DEALER LICENSE

D- _____

Column 1	Column 2
License Fee \$ _____	1 st Auto_ 1 st MC _____ Tag Fee \$ 275.50
	add'l Auto Plate(s) @ \$ 25.50 ea. \$ _____
	add'l MC Plate(s) @ \$ 25.50 ea. \$ _____
	Trailer Plate(s) @ \$ 25.50 ea. \$ _____
	Full Use Plate(s) @ \$350.50 ea. \$ _____
	DH Full Use Plates @ \$350.50 ea. \$ _____
Subtotal Column 1 \$ _____	Subtotal Column 2 \$ _____
	TOTAL FEES DUE \$ _____

**FEES ARE TO BE REMITTED WITH APPLICATION AND ARE NOT PRORATED
YOU ARE AUTHORIZED A TOTAL OF (3) PLATES. YOU CANNOT ADD ADDITIONAL PLATES.**

**STATEMENT OF WHO IS AUTHORIZED TAGS:
X - DEALER ARE ALLOWED TAGS Y - DEALERS ARE ALLOWED PLATES IF IN-STATE ONLY**

Areas with * are required fields.

1. *Name of Business _____

dba Name _____

*Business Address _____

*City _____ *County _____ *State _____ *Zip _____

*Business Phone _____ Fax _____ Cell Phone _____

(Your business phone must be in the business name and listed with the phone company).

Email Address _____

2. * FEIN # _____ **(Copy of certificate must be attached)**

3. * Check type of dealer license that is being applied for:

- | | | |
|--|--|---|
| _____ New & Used Vehicle Dealer \$75.00
(Autos, Trucks, Motorcycles, Trailers) - X | _____ Salvage Pool \$75.00 | _____ Distributor \$75.00 - Y |
| _____ Used Vehicle Dealer \$75.00
(Autos, Trucks, Motorcycles, Trailers) - X | _____ Vehicle Recycler \$75.00 | _____ Distributor Branch \$75.00 - Y |
| _____ **Salvage Vehicle Dealer \$75.00 - X | _____ Rebuilder \$75.00 | _____ Lending Agency \$50.00 - Y |
| _____ Wholesale Vehicle Dealer \$75.00 - X | _____ 1 st and 2 nd Stage Manufacturer \$225.00 | _____ Used RV Broker Dealer \$75.00 |
| _____ Auction Motor Vehicle Dealer \$75.00 - X | _____ 1 st and 2 nd Stage Converter \$50.00 - Y | _____ Vehicle Crusher \$75.00 |
| _____ Insurance Company \$75.00 - X | _____ Factory Branch \$75.00 - Y | _____ Scrap Metal Recycler \$75.00 |

** Indicates KDOT Compliance is required. D-35 form must accompany application.

4. *Check space which indicates type of business entity: *** must include copy of Secretary of State's registration papers.

Sole Proprietor
 Partnership
 Corporation***
 Limited Liability Co.***
 LTD Company***
 Limited Liability Partnership***
 Date Incorporated/Registered & State _____

5. *Please complete the below information for each owner(s) of your business. NOTE: When a corporation is owned by more than 20 stockholders, such corporation may list the President, Vice President, Secretary & Treasurer of the corporation in lieu of listing the stockholders. **THE BELOW OWNER/CORPORATE OFFICER INFORMATION IS REQUIRED.**

Name (Complete Legal Name) PLEASE PRINT	Residence Address	Residence Ph	Birth Date	SSN	Sex

6. You are required to submit three credit references: (If corporation, this section is not applicable). Submit three credit references on their business letterhead.

7. **Form D-100 must be filed with the Division of Vehicles if you are applying for a new vehicle dealer's license. If you need this form contact this office. 785-296-3626.**

8. * Have you ever been licensed as a vehicle dealer? _____ If YES, year _____ D# _____

9. * Are you engaged in the vehicle business in any other location? Yes _____ No _____

If yes, give City, State and Dealer number. _____

10. * Have you ever been denied a dealer license or has your dealer license ever been suspended or revoked, either in this state or any other? _____ If YES, give reason _____

11. * In accordance with K.S.A., 1992 Supp., 8-2410(a)(21), state whether within the five years immediately preceding the date of filing this application, you have been convicted of a felony? YES _____ NO _____

12. * List any supplemental locations to be located in the same county as your place of business. You are required to submit an approved zoning permit, \$35.00 fee and field approval for each additional location.

PERSONAL PROPERTY TAX CERTIFICATION

14. * I, the undersigned County Treasurer, certify that personal levied for the preceding year against all firm owners shown hereon have been paid in full; have been paid for the half of the preceding year, or that satisfactory evidence has been presented to this office that said owners had no taxable property for the preceding year.

Dated at _____, Kansas, this _____ day of _____,

Co. Treasurer's Signature _____ County _____

ZONING CERTIFICATION

16. * New or used vehicle dealers, wholesalers, brokers, salvage vehicle dealers, first or second stage manufacturers, first and second stage converters, salvage pool, vehicle recycler, rebuilder, vehicle crusher, scrap metal recycler, must maintain an established place of business to be licensed. "Established place of business" means a building or structure, other than a building or structure all or part of which is occupied or used as a residence owned either in fee or leased and designated as an office or place to receive mail and keep records and conduct the routine of business. If such established place of business or lot is zoned, the correct business address and legal description of the property must be provided to the zoning authority, and proof that the use complied with the applicable zoning law, ordinance or resolution must be furnished to the director by the applicant. If no zoning exists agent must indicate below.

There may be other local ordinances that prohibit the issuance of this license, check with your local city business office.

ANY AREA LEFT BLANK WILL VOID ZONING CERTIFICATION.

This is to notify you that _____
Complete Business Name

located at _____ is in conformance with the
Address, City, State, Zip
 zoning ordinances or regulations of the city or county of _____, Kansas.

This location is hereby approved to conduct business as the license type of _____.
(License Type)

Signature of Zoning Agent	Title	Date
Address of Zoning Office		
City	State	Zip Code
Zoning Office Phone Number		
Zoning Office Fax Number		

Directions to the above location: _____

Copy of current Certificate of Insurance is enclosed.
Your insurance policy must stay in effect, with no lapse in coverage or your license may be revoked pending a Dealer Licensing Hearing.

Original Bond form with Power of Attorney attached is enclosed.
 Any time you make a change; such as your business name, business address, entity or owners, you must notify your bond company.
Your bond must stay in effect during your license tenure, or your license may be revoked pending a Dealer Licensing Hearing.

***OWNER CERTIFICATION**

17. I certify that, as proprietor, partner or corporate officer of the firm, I have authority to sign and submit this application; and that all statements contained therein are true and correct.

I further state that by applying for a vehicle dealer's license that I am granting the Dealer Licensing Bureau Representative to access all sales tax information for my dealership.

Owner's Name _____
(Please Print)

Owner's Signature _____ Date _____

18. * **Have you filed a Federal and State Income Tax return for each of the last 3 years?** Yes _____ No _____
 20 _____ 20 _____ 20 _____

"All taxpayers, citizens, and businesses of the State of Kansas are expected to fulfill their legal responsibility to timely file and pay their share of state taxes. In accordance with K.S.A. 8-2404^o, once an application for license has been submitted to the director of vehicles, the owner(s) and/or corporate officer(s) and the business will be subject to a tax clearance prior to the issuance of a license. A tax clearance is a thorough review of all taxes administrated by the Kansas Department of Revenue. A license can be granted or refused based on the results of the tax clearance."

