

KANSAS DEPARTMENT OF REVENUE
DIVISION OF VEHICLES
DEALER LICENSING BUREAU
TOPEKA, KANSAS 66626-0001
(785) 296-3621 FAX (785) 296-3852

FOR OFFICE/FISCAL USE ONLY	
VALIDATION NUMBER	_____
TYPE: TAX OR FEE:	<u>DEALER PERMITS</u>
FOLDER NUMBER	_____

DATE RECEIVED _____

30-DAY TEMPORARY PERMIT ORDER FORM

Dealer # _____

Type of Permit (Must Check One)

- Car/Truck/Trailer
 Motorcycle

Number of Permits Requested _____

TOTAL FEE DUE \$ _____

30-Day Permits are sold in bundles of (10) at \$30.00 per bundle.

Please complete this form and mail to the above address. Please allow **2 weeks** delivery time.

Dealer Business Name _____

DBA (if applicable) _____

Business Street Address _____

City _____ State _____ Zip _____

Business Telephone Number (_____) _____

Owner's Hand Printed Name _____

Owner/Representative Signature _____ DATE _____

PLEASE NOTE:

There will be a delay in your permits if your order is received with incorrect remittance or you are not current on your Vehicle Dealer Monthly Sales Reports, Bond or Insurance.

This form is used to order 30-Day Permits only. If you have changed your business name or business location please contact the Dealer Licensing Bureau immediately.
(785) 296-3621.

Order filled by _____
Initials