

Motor Vehicle Dealer Board Business Disposal License Application

Check One		Check One			
<input type="checkbox"/> Original Application <input type="checkbox"/> Change of Entity <input type="checkbox"/> Current dealer number _____		<input type="checkbox"/> Individual <input type="checkbox"/> Partnership <input type="checkbox"/> Ltd Liab. Partnership		<input type="checkbox"/> Corporation <input type="checkbox"/> Corporation - Publicly Traded <input type="checkbox"/> Ltd Liab. Company	
1. Name of Applicant (Individual/Partners/Corporation/LLC/LLP)		Sales Tax Number		Federal ID. Number	
2. Trade Name (DBA)		Business Phone ()	FAX Number ()	Email Address	
3. Primary Business Street Address		City	ZIP	County	
4. Mailing Address (if different)		City	ZIP	County	
5. Premises are: <input type="checkbox"/> Owned <input type="checkbox"/> Leased	If leased, from whom?	Address of Lessor		Date Lease Expires	
6. 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 Number and Email Address	Home Phone	% Owned
			SSN		
			Email		
			SSN		
			Email		
			SSN		
			Email		
7. Can each owner or partners provide proof of lawful presence in the U. S.? (Attach copy of Verifiable ID) <input type="checkbox"/> Yes <input type="checkbox"/> No Please review rules in order to understand what constitutes "Proof of Lawful Presence". www.colorado.gov/revenue/aid (See section: Licensing)					
8. If there is an existing motor vehicle dealer at this location, provide the dealer name and dealer license number					
9. List all authorized Locations. Use additional sheets or attachments as necessary.					
10. By checking each box, Applicant certifies that they have met OR will meet the following requirements to sell used motor vehicles:					
<input type="checkbox"/> Vehicles have been owned more than one (1) year.		<input type="checkbox"/> Vehicles have been used exclusively for business purposes			
<input type="checkbox"/> Vehicles are titled in the name of the business		<input type="checkbox"/> All related taxes have been paid			
<input type="checkbox"/> Vehicles are not designed or used primarily to carry passengers, not including a vehicle designed primarily for transporting more than ten (10) individuals; or a truck having an enclosed cab and an open cargo area.					
<input type="checkbox"/> Applicant's gross income as reported on the Statement of Financial is true and accurate.					
<input type="checkbox"/> Upon sale of vehicles, the sales value of all the motor vehicles sold does not exceed twenty (20) percent of the business gross revenue.					
I have read the foregoing application and I know the contents thereof. All matters and things therein set forth are true under penalty of perjury in the second degree. I agree to conform to all rules and regulations promulgated by the Motor Vehicle Dealer Board. I do hereby appoint the Executive Secretary of the Motor Vehicle Dealer Board as my true and lawful agent for the service of process 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 Motor Vehicle Dealer Law. I hereby authorize the release to Board agents of any and all records pertaining to my employment and criminal background.					
Signature				Title	
Printed Name				Date	
For Official Use Only	Criminal History	Board Action: <input type="checkbox"/> Approved <input type="checkbox"/> Denied	Dealer Number	Date Issued	Fee Required & Submitted
		Date			\$.00