



This Certifies  
Is duly licensed  
as a motor vehicle/  
powersports vehicle

This license is issued under the provisions of Title 44, Article 20, Colorado Revised Statutes.

Issued

Expires

EXECUTIVE DIRECTOR  
Department of Revenue

**Dealership Copy**

▼ Detach Here ▼

DR 2132 (05/27/21)  
COLORADO DEPARTMENT OF REVENUE  
SBG.Colorado.gov/AID  
303-205-5604

Mailing Address: PO Box 17087  
Denver CO 80217-0087

**CHANGE OF EMPLOYER NOTIFICATION**

**INSTRUCTIONS:** Licensee must retain this section to transfer license to another Dealer. If this section is not presented at time of transfer, a license must be reissued and an additional fee will be charged.

<b>AID Copy</b>	Name		License Number	Issued	Expires
	Bond Number		Bond Issue	Dealership Number	
	<b>PLEASE TRANSFER MY MOTOR VEHICLE SALESPERSON LICENSE TO THE DEALER LISTED BELOW.</b>				
	Salesperson Signature			Date	
	Have you been convicted of a crime (excluding traffic violations) in the past 12 months? <input type="checkbox"/> Yes <input type="checkbox"/> No Explain "Yes" answer below OR include a separate sheet of paper with explanation and attach copies of final court documents.				
	<b>PLEASE CHANGE YOUR RECORDS TO SHOW THE ABOVE-NAMED SALESPERSON IS NOW IN OUR EMPLOYMENT.</b>				
	Dealer Name		Dealer Number	Date Of Hire	
	Authorized Dealer Signature		Title	Date	

The AID mailing address is listed at the top of this form. The physical address is:  
1707 Cole Blvd., Suite 300, Lakewood CO 80401.

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