



# Instructions

**Dealer Name:** Enter the name of the licensed vehicle dealer.

**Designated Agent Number:** Enter the dealer's designated agent number. *Note: manufacturers are not required to be designated agents.*

**Mailing Address:** Enter the complete mailing address of the dealer.

**Street Address:** Enter the complete street address of the dealer if different from the mailing address. *Note: temporary tags will be shipped to the street address.*

**County:** Enter the county which corresponds to the dealer's street address.

**Contact Person:** Enter the name of the person to contact regarding temporary tags.

**Telephone Number:** Enter the telephone number, including the area code and extension, of the contact person.

**Fax Number:** Enter the fax number, including the area code, of the contact person.

**Email Address:** Enter the email address of the contact person.

**Temporary Tags Fee:** Multiply the number of temporary tags requested by the temporary tag issuance fee of \$2.25.

**Name:** Enter the name of the person completing this application. This person should be authorized by the dealer or manufacturer to perform these duties.

**Title:** Enter the title of the person completing this application.

**Signature:** The signature of the person completing this application.

**Date:** Enter the date the application was completed.

Please mail application and remittance to:

Alabama Department of Revenue  
Motor Vehicle Division  
P.O. Box 327630  
Montgomery, AL 36132-7630