



APPLICATION FOR MODIFICATIONS TO AN OCCUPATIONAL LICENSE

(Submit a separate form for each business location)

FOR DMV USE ONLY	
FIRM NUMBER	DATE APP RECEIVED
ACR NUMBER	DATE PERMIT ISSUED
NMVB FEE	DATE PERMIT EXPIRES
OTHER FEE	REGION CC:
TOTAL FEE	INSPECTOR NAME/ID NUMBER
S/R NUMBER	

Instructions: Complete online or print and complete by hand using black or blue ink.

A. CURRENTLY LICENSED AS: *(Check one box.)*

- Dealer New
 Dealer-Wholesale Only
 Dismantler
 Transporter
 Distributor
 Dealer Used
 Dealer Autobroker
 Lessor-Retailer
 Manufacturer
 Remanufacturer

B. REASON FOR SUBMISSION: *(Check all that apply and complete the sections indicated.)*

	COMPLETE SECTIONS							COMPLETE SECTIONS						
	C	E		I	J	K		C	D	E		I	J	K
<input type="checkbox"/> Add Branch Location	C	E		I	J	K	<input type="checkbox"/> Change Branch Location	C	D	E		I	J	K
<input type="checkbox"/> Add Dismantler Branch	C			H	J	K	<input type="checkbox"/> Change Corporate Name	C	D					K
<input type="checkbox"/> Add Firm Name	C					K	<input type="checkbox"/> Change Firm Address	C	D	E		I	J	K
<input type="checkbox"/> Add or Delete Make or Line	C		G			K	<input type="checkbox"/> Change Firm Name	C	D					K
<input type="checkbox"/> Add or Delete Category	C		G			K	<input type="checkbox"/> Dealer Type License Change	C		E	F			K
<input type="checkbox"/> Add Autobroker	C					K	<input type="checkbox"/> Delete Autobroker	C						K

C. FIRM INFORMATION:

TRUE FULL NAME OF SOLE OWNER, ALL PARTNERS, CORPORATION, LIMITED LIABILITY COMPANY, OR ASSOCIATION	FIRM NUMBER
FIRM NAME <i>(IF CHANGING OR ADDING NAME, LIST NEW NAME)</i>	AREA CODE/TELEPHONE NUMBER ()
FIRM ADDRESS <i>(IF CHANGING ADDRESS OR ADDING BRANCH, LIST NEW ADDRESS)</i>	CITY STATE ZIP CODE

D. FORMER NAME OR ADDRESS:

FORMER NAME _____

FORMER ADDRESS _____

E. CHECK THE VEHICLES TO BE SOLD, MANUFACTURED OR DISTRIBUTED AT THIS LOCATION:

	NEW	USED
	<input type="checkbox"/> Automobile/Commercial* <input type="checkbox"/> Motorcycle* <i>(including Off-Highway)</i> <input type="checkbox"/> All-Terrain Vehicle* <input type="checkbox"/> Motorhome* <input type="checkbox"/> Recreational Trailer* <input type="checkbox"/> Trailer+ <input type="checkbox"/> Snowmobile* <i>*OL 124 required. + Letter of Authorization required.</i>	<input type="checkbox"/> Automobile/Commercial <input type="checkbox"/> Motorcycle <i>(including Off-Highway)</i> <input type="checkbox"/> All-Terrain Vehicle <input type="checkbox"/> Motorhome <input type="checkbox"/> Recreational Trailer <input type="checkbox"/> Trailer <input type="checkbox"/> Snowmobile

F. DEALER ONLY: *(Type license change.)*

- CHANGING FROM**
 Dealer New
 Dealer Used
 Dealer-Wholesale Only
CHANGING TO
 Dealer New
 Dealer Used
 Dealer-Wholesale Only



