

KANSAS DEPARTMENT OF REVENUE
DIVISION OF VEHICLES
DEALER LICENSING BUREAU
DOCKING STATE OFFICE BUILDING
TOPEKA, KANSAS 66626-0001
Phone: (785) 296-3621 Fax (785) 296-5854
Web Site: www.ksrevenue.org/dmv

Renewal
Original

Validation # _____
License Fee _____
Folder # _____
Dealer # _____

**ORIGINAL APPLICATION/EXAMINATION
FOR VEHICLE SALESPERSON, FACTORY REPRESENTATIVE OR DISTRIBUTOR REPRESENTATIVE**

Please print legibly.

1.

Social Security Number	(Applicants) Last Name	First Name	MI
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2.

(Applicants) Street Address	City	State	Zip Code
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3.

Applicants Home Phone Number	Drivers License Number	State/Issued
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Date of Birth	Sex: <input type="checkbox"/> M <input type="checkbox"/> F
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4. I REQUEST THE FOLLOWING LICENSE:

<input type="checkbox"/> New and Used Vehicle Sales	(\$25.00)	<input type="checkbox"/> Factory Representative	(\$50.00)
<input type="checkbox"/> Used Vehicle Sales	(\$25.00)	<input type="checkbox"/> Distributor Representative	(\$50.00)
5.

Employers Firm Name	Firm Telephone Number	D- Employers D#
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6.

Firm Address	City	County	State	Zip Code
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7. Have you ever been licensed in Kansas as a vehicle or manufactured home salesperson or factory/distributor representative?
NO ☐ YES ☐ (If yes, give date(s) of employment and employer(s): Attach sheet, if needed)
Past Employer _____ City _____
From _____ To _____
8. Have you ever been denied a salesperson's factory/distributor representative license or has your salesperson's factory/distributor representative license ever been suspended/revoked, either in this state or any other state? (If yes, give date and reason for suspension/revocation) _____
9. In accordance with K.S.A. 1992 Supp., 8-2410(a)(21), state whether within the five years immediately before the date you are making this application for license you have been convicted of a felony? YES ☐ NO ☐
10. I certify that I am or will be, upon the issuance of the license requested, employed by the firm named in Item 5, I am familiar with Kansas laws governing the sales of vehicles. I will not: misrepresent, circumvent, or conceal through any subterfuge or device information or facts which are required to be stated or furnished to the retail buyer, knowingly make a fraudulent sale or transaction or violate any Kansas Statutes. I further certify all the statements which I have made or caused to be made on my behalf in this application are true and correct to the best of my knowledge and belief and that I am aware that K.S.A. 1992 Supp., 8-2410(a)(2) provides that a license may be denied, suspended or revoked or its renewal refused for making a material false statement in an application for a license.

Applicant's Hand Printed Name

Signature of Applicant

11. I certify that the above named applicant is employed by the firm named in Item 5 and I am authorized as proprietor, partner, corporate officer or general manager of the firm to sign this application. Further, I certify that if a temporary salesperson's license is granted to this applicant by the director, the salesperson so licensed will be under the direct supervision of the sales manager, general manager or a designee appointed by the manager to directly supervise temporarily licensed salespersons. **Only 1 salesperson's temporary permit may be issued to the same applicant in a 12 month period.**

(Hand Print Only) Name of Employer or Authorized Agent & Position

Signature of Employer or Authorized Agent

**If you are applying for a New & Used Vehicle Salesperson or a Used Vehicle Salesperson license,
you are required to complete the test form D55a on the backside of this application.**