MOTOR VEHICLE WHOLESALER TWO YEAR LICENSE APPLICATION

MV2860 10/2019 Ch. 218 Wis. Stats.

☐ Amending Current License Information

FOR OFFICE USE ONLY	
Issued	Expires

Wisconsin Department of Transportation
Dealer Section
PO Box 7909
Madison, WI 53707-7909

Legal Name	Area Code - Telephone Number	Dealer License Number
Trade Name(s) or DBAs		Federal Employer Identification Number
Street Address or RFD / Post Office Box Number / City / State / ZIP Code		County where business located

Type of Vehicles to be Sold	Business Entity		If Corporation or LLC, Date Licensed in Wisconsin	☐ City ☐ Village ☐ Township Name:
☐ Autos ☐ Trucks ☐ Motorcycles	☐ Sole Proprietorship ☐ Partnership	☐ Association ☐ Corporation ☐ LLC		State of Incorporation or Organization

Name and Title of Owner, Partners, Association Members, Corporation Officers and Shareholders, LLC Managers and Members
Complete an Entity/Owner Statement (Form MV2844) for each individual listed.

Was there a licensed dealer at this same location previously this year?
☐ No ☐ Yes, Name dealer _____

Have you, as an individual and your above-named firm, been licensed as a dealer before?
☐ No ☐ Yes, Same location? ☐ No ☐ Yes

Has your motor vehicle dealer license ever been denied, suspended or revoked?
☐ No ☐ Yes, When and what state? _____

Are you licensed as a motor vehicle salvage dealer at same location?
☐ No ☐ Yes, Give license number _____

Will your wholesaler license be used to operate a motor vehicle salvage pool in accordance with s.218.50 Wis. Stats.? ☐ Yes ☐ No

Complete ONE of the following (whichever applicable):

Is business real estate owned by:	YES	NO
Owner of sole proprietorship	☐	☐
One partner of partnership	☐	☐
Corporate dealership	☐	☐
LLC	☐	☐

If no, send copy of lease.

Number of vehicles sold wholesale in last 12 month period

AUTOS	TRUCKS	MOTORCYCLES	OTHERS (specify)

License Numbers of Additional Dealerships

Completely describe other business, if any, engaged in by your firm - Same location?
☐ No ☐ Yes

Dealer License (Required fee).....$40.00	
Wisconsin Buyer's License(s)....Number _____ x $12.00	0.00
Buyer ID Card(s)..... Number _____ x $12.00	0.00
Dealer License Plates Required.....First 2 plates = $150.00	
Number of additional plates _____ @ $10.00	0.00
List letters of all missing plates _____	
Replacement License Plates for lost, damaged, or illegible plates.....each plate $4.00	
CHECK PAYABLE TO: REGISTRATION FEE TRUST $	0.00

I, the undersigned, certify under penalty of s.345.17 Wisconsin Statutes, that: (1) A lease agreement covering at least the licensing year has been executed, if premises are not owned by applicant, and; (2) The answers and statements on this application are true and correct to the best of my knowledge.

See reverse side.

X _____
(Authorized Dealership Agent, Title) (Date)

Clear Form

Following Applies To First-time Dealer Applicant Or Application For Amended License Because of Business Relocation or Ownership Change

Proper local officials must sign below, BEFORE submitting this application. All applicants complete section A.
If business is located in a township, complete both sections A and B.

Attention Zoning Authorities: The requirements for a motor vehicle wholesaler/distributor are as follows:

1. A permanent building, not a tent or temporary stand.
2. An office within the building.
3. An outdoor vehicle display lot for at least one vehicle adjacent to the building or all vehicles kept indoors.
4. An exterior sign with business name as it will appear on the license certificate and any other name used to do business under. The lettering of the sign must be a minimum of 4 inches high, unless smaller dimensions are required by local zoning or sign ordinance.
5. A sign posted on or adjacent to the entrance door describing business hours. The sign must also include a notice that sales are restricted to dealers only.

Section A

Business Name / Location

1. Operation of this dealer business at the location(s) stated above is in accordance with local zoning regulation.

(Print Name) X (Signature)

(Official Title) (Municipality)

2. Check one box and sign below:

☐ A local permit or license is required and has been issued.

☐ A local permit or license is not required.

(Print Name) X (Signature)

(Official Title) (Municipality)

Section B

Business Name / Location

County Zoning Approval - required only if business is located in a township.

Operation of this dealer business at the location(s) stated above is in accordance with local zoning regulation.

(Print Name) X (Signature)

(Official Title) (County)

If business address on reverse side does not include a specific street number, furnish directions to your business location, including highway numbers or letters and distances.

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