Virginia Department of Motor Vehicles
Post Office Box 27412
Richmond, Virginia 23269-0001
www.dmv.virginia.gov

MANUFACTURER AND DISTRIBUTOR LICENSE APPLICATION

PURPOSE: Manufacturers, distributors and factory branches use this form to apply for, renew or change a license to do business in the Commonwealth.

INSTRUCTIONS: Submit a completed application and a non-refundable fee to any DMV Customer Service Center or mail to the address provided above. Each applicant must include a sample franchise agreement if doing business with more than one dealer. The applicant may choose not to submit a sample franchise agreement but must include a statement acknowledging their understanding that they must provide a sample franchise agreement upon doing business with more than one dealer. Each distributor must include a copy of a distributor agreement or a parent letter from, the manufacturer or parent distributor authorizing the distribution of each vehicle line-make on the application.

APPLICATION TYPE

Select one:

☐ INITIAL APPLICATION - $100 per yr. * DSD 7 Req.

☐ RENEWAL APPLICATION - $100 per yr. * DSD 7 Req.

☐ CHANGE - $10 Select a reason:
☐ Address Change ☐ Name Change
☐ Add Manufacturer ☐ Delete Manufacturer
☐ Add Distributor ☐ Delete Distributor

*An initial or renewal also requires a "Manufacturer or Distributor Representative License Application" (DSD 7).

VEHICLE/BUSINESS TYPE

Vehicle Type: Select one.

☐ CAR / TRUCK / UTILITY ☐ MOTORCYCLE ☐ TRAILER ☐ RECREATIONAL VEHICLE

Business Type: Select one.

☐ **MANUFACTURER -** a person engaged in the business of constructing or assembling new motor vehicles and, in the case of trucks, also means a person engaged in the business of manufacturing engines, transmissions, power trains, or rear axles, when such engines, transmissions, power trains or rear axles are not warranted by the final manufacturer or assembler of the truck.

☐ **DISTRIBUTOR -** a person who sells or distributes new motor vehicles or new trailers pursuant to a written agreement with the manufacturer to franchised motor vehicle dealers in the Commonwealth.

☐ **DISTRIBUTOR BRANCH** – a branch office licensed by the Department and maintained by a distributor for the sale of motor vehicles to motor vehicle dealers or for directing or supervising, in whole or in part, its representatives in the Commonwealth.

☐ **FACTORY BRANCH** – a branch office maintained by a person for the sale of motor vehicle to distributors for the sale of motor vehicles to motor vehicle dealers, or for directing or supervising, in whole or in part, its representatives in the commonwealth.

License Period: Select one.

☐ 1 Year ☐ 2 Years

BUSINESS INFORMATION

BUSINESS NAME	TRADING AS NAME	LICENSE NUMBER	
BUSINESS STREET ADDRESS	CITY	STATE	ZIP CODE
BUSINESS MAILING ADDRESS	CITY	STATE	ZIP CODE

BUSINESS JURISDICTION	☐ COUNTY OR ☐ CITY	FACTORY REPRESENTATIVE (person operating business)
FEDERAL EMPLOYER ID NUMBER	BUSINESS PHONE NUMBER ( )	FACTORY REP. PHONE NUMBER ( )
BUSINESS EMAIL ADDRESS	BUSINESS WEBSITE ADDRESS ( )	
TYPE OF OWNERSHIP: Select one ☐ INDIVIDUAL ☐ PARTNERSHIP ☐ CORPORATION ☐ LLC		STATE IN WHICH INCORPORATED ( )

GIVE THE NAME, TITLE AND RESIDENTIAL ADDRESS OF EACH OWNER, PARTNER AND/OR OFFICER OF THE BUSINESS (attach additional sheets if necessary)

NAME	TITLE	ADDRESS

LIST LINE-MAKE(S) OF VEHICLE(S) TO BE SOLD IN THE COMMONWEALTH. **DO NOT** LIST MODELS AS LINE-MAKE(S) (attach additional sheets if necessary)

LIST APPLICANT'S FRANCHISE DEALER(S) (attach additional sheets if necessary)

FRANCHISE DEALERSHIP	DEALERSHIP LOCATION	LINE-MAKE(S)

OWNER/PARTNER/OFFICER INFORMATION

Read each question below and check the appropriate response.

A. Has any owner, partner or officer of the business ever:

1. Been refused a license or Certificate of Registration for conducting motor vehicle or trailer business or ever had this credential suspended or revoked? . . . . . ☐ YES ☐ NO
2. Been convicted of a felony? . . . . . ☐ YES ☐ NO
3. Been convicted of a fraudulent criminal act in connection with the business of selling motor vehicles or trailers; larceny of a vehicle or receipt or sale of a stolen vehicle, or odometer tampering or related violation? . . . . . ☐ YES ☐ NO
4. Committed any act or omitted any duty, which has resulted in administrative action by the Motor Vehicle Dealer Board or DMV? . . . . . ☐ YES ☐ NO

B. Does any owner, partner or officer of the business own, operate, or control any vehicle dealership in the Commonwealth? ☐ YES ☐ NO

If the answer to any of the above questions is **YES,** please explain on a separate attached sheet (include names, dates, court jurisdiction and result of administrative proceedings.)

FRANCHISE AGREEMENT INFORMATION (Sample franchise agreement is required.)

Read the following agreement information, and check the box below:

A sample franchise agreement or sale, service or sales and service agreement refers to a manufacturers or distributors standard franchise agreement provided to all dealers that do not contain particularized terms, such as specific dealer's names, dealership address, dates or signatures of the parties.

Va. Code. 46.2-1569(9) requires that a franchise agreement contain the following language or words to the same effect:
If a provision herein contravenes the laws or regulations of any state or jurisdiction wherein this agreement is to be performed, or denies access to the procedures, forums, or remedies provided to such laws or regulations, such provision shall be deemed to be modified to conform to such laws or regulations, and all the other terms and provisions shall remain in full force, or words to that effect.

The above language, or words to the same effect, may appear in the main text or as an addendum to the franchise agreement. If an addendum is selected, the form must contain signature lines for the parties.

☐ *By checking this box, I have read the information above and included the required documents with this application.*

PRIVACY STATEMENT

In accordance with Virginia Code §§ 2.2-803, 2.2-4807 and § 58.1-520 et seq., the State Comptroller requires that this information, including your social security number, be collected for debt set off collection purposes.

CERTIFICATION

I certify and affirm that all information presented in this form is true and correct, that any documents I have presented to DMV are genuine, and that the information included in all supporting documentation is true and accurate. I make this certification and affirmation under penalty of perjury and I understand that knowingly making a false statement or representation on this form is a criminal violation.

OWNER/PARTNER/OFFICER OF BUSINESS NAME (print)	NAME OF BUSINESS

OWNER/PARTNER/OFFICER OF BUSINESS NAME (signature)	DATE (mm/dd/yyyy)

DMV USE ONLY

P.C.T. & O. FEE	SLS FEE	AMT. OF CHECK	TOTAL FEE	OVERPAY	CHECK NO.

RETURN OVERPAY FOR APPROVAL	ASMT. FEE	CLERK'S INITIALS