



MISSISSIPPI MOTOR VEHICLE COMMISSION

1755 Lelia Drive, Suite 200
Jackson, MS 39216
Phone: 601-987-3995
Fax: 601-987-3997
Email: info@mmvc.ms.gov

APPLICATION FOR LICENSE OF SALESPERSON OR REPRESENTATIVE

Salespersons must be licensed within 10 days. After the 10th day, late fees will incur.

Pursuant to the provision of the Mississippi Motor Vehicle Commission Law §63-17-81 and §63-17-83, application is hereby made for a license as indicated.

Please check only ONE clarification:

- Factory Representative \$300.00*
- Distributor Representative \$300.00*
- New Motor Vehicle Salesperson \$10.00
- New Motor Vehicle Salesperson Transfer \$2.50**

** Includes \$100.00 license fee plus \$200.00 administrative fee.*

*** Transfer must be within 15 days of last license*

**License Number and Name of Dealership/
Manufacturer/Distributor:** _____

Check Number: # _____

Check Amount: \$ _____

1. Name: _____
Social Security Number: _____
Date of Birth: _____
City: _____ State: _____

2. Date you began selling vehicles or contacting dealers:
MM / DD / YYYY

3. Name of Previous Employer: _____
Reason for leaving (transfers only): _____

4. Have you ever been charged with a felony or misdemeanor? YES NO

5. Have you ever been, or are you now, under indictment, or do you have pending charges against you of a criminal nature, other than traffic violations? YES NO

(If answer to either of these is "Yes", attach a separate sheet advising fully of all details, including court and police records.)

I hereby certify that the statements in or attached to this application are true and correct to the best of my knowledge and belief; that I am familiar with the provisions under the law which this application is made. I authorize and consent to your request of the inspection of any and all criminal records information in the possession of or accessible by the Mississippi Justice Information Center, including, but not limited to, any past history of a criminal offense(s) for which I may have been charged or convicted.

Signed: _____
(Applicant's Name)

(Notary Public)



Subscribed and sworn to (or affirmed)
before me this _____ day
of _____, _____.

My commission expires: _____
STATE OF _____
COUNTY OF _____

EMPLOYER'S ENDORSEMENT

The foregoing answers by the above applicant have been read by me and are believed to be true to the best of my knowledge and belief. The applicant is recommended as trustworthy and a person who will abide by the provisions of the law and rules and regulations governing the sale of new motor vehicles.

Authorized Signature of Employer: _____

Title: _____

Name of Company: _____