

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

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

Please check only ONE clarification:	1	Name:
O New Motor Vehicle Salesperson	\$10.00	Social Security Number:
O New Motor Vehicle Salesperson Transfe	er \$2.50**	Date of Birth:
** Transfer must be within 15 days of last license		City: State: Zip Code:
Dealership Name:		
Dealer License No.:	2	Date you began selling at current dealership:
Check Number: #		Name of Previous Dealership Employer:
Check Amount: \$)
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 crimina 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.)
am familiar with the provisions under the law which of any and all criminal records information in the	ch this application is ma possession of or acces	ade. I authorize and consent to your request of the inspection sible by a third party private company, including, but not
am familiar with the provisions under the law white of any and all criminal records information in the limited to, any past history of a criminal offense(s	ch this application is ma possession of or acces	
am familiar with the provisions under the law white of any and all criminal records information in the limited to, any past history of a criminal offense(s	ch this application is ma possession of or acces	ade. I authorize and consent to your request of the inspection sible by a third party private company, including, but not
am familiar with the provisions under the law white of any and all criminal records information in the limited to, any past history of a criminal offense(s) Signed: (Applicant's Name)	ch this application is ma possession of or acces	ade. I authorize and consent to your request of the inspection sible by a third party private company, including, but not been charged or convicted. (Notary Public)
am familiar with the provisions under the law whith of any and all criminal records information in the limited to, any past history of a criminal offense(standard supplemental supplementa	ch this application is mapossession of or access) for which I may have	ade. I authorize and consent to your request of the inspection sible by a third party private company, including, but not been charged or convicted.
am familiar with the provisions under the law white of any and all criminal records information in the limited to, any past history of a criminal offense(s	ch this application is ma possession of or acces	ade. I authorize and consent to your request of the inspection sible by a third party private company, including, but not been charged or convicted. (Notary Public) My commission expires:
am familiar with the provisions under the law whith of any and all criminal records information in the limited to, any past history of a criminal offense(standard supplicant's Name) Subscribed and sworn to (or affirmed) before me this day	ch this application is mapossession of or access) for which I may have	ade. I authorize and consent to your request of the inspection sible by a third party private company, including, but not been charged or convicted. (Notary Public) My commission expires: STATE OF
am familiar with the provisions under the law whith of any and all criminal records information in the limited to, any past history of a criminal offense(s Signed: (Applicant's Name) Subscribed and sworn to (or affirmed) before me this day of	ch this application is mapossession of or access of for which I may have I	ade. I authorize and consent to your request of the inspection sible by a third party private company, including, but not been charged or convicted. (Notary Public) My commission expires: STATE OF COUNTY OF
am familiar with the provisions under the law whit of any and all criminal records information in the limited to, any past history of a criminal offense(s Signed: (Applicant's Name) Subscribed and sworn to (or affirmed) before me this day of EMP The foregoing answers by the above applicant ha and belief. The applicant is recommended as trusted.	ch this application is mappossession of or access of for which I may have be seen read by me another worthy and a person we stworthy and a person we can be seen to the second of the se	ade. I authorize and consent to your request of the inspection sible by a third party private company, including, but not been charged or convicted. (Notary Public) My commission expires: STATE OF COUNTY OF
am familiar with the provisions under the law which of any and all criminal records information in the limited to, any past history of a criminal offense(standard Signed: (Applicant's Name) Subscribed and sworn to (or affirmed) before me this day of EMF The foregoing answers by the above applicant has	ch this application is mapossession of or access of for which I may have be seen read by me an attworthy and a person vices.	ade. I authorize and consent to your request of the inspection sible by a third party private company, including, but not been charged or convicted. (Notary Public) My commission expires: STATE OF COUNTY OF DORSEMENT Indian are believed to be true to the best of my knowledge