

OKLAHOMA MOTOR VEHICLE COMMISSION

APPLICATION PACKET FOR MANUFACTURER or DISTRIBUTOR LICENSE

A new motor vehicle Manufacturer, Distributor, Factory Branch, or Distributor Branch must be licensed, by this agency, before legally operating in Oklahoma. This means prior to the establishment of a dealer/distributor network! Sanctions such as fines or denial of license may be imposed for non-compliance.

CAREFULLY FOLLOW THE CHECKLIST BELOW TO MAKE PROPER APPLICATION.

- ___ 1. **APPLICATION FORM**: Form must be fully completed, signed and notarized.
- ___ 2. **FINANCIAL INFORMATION**: A company **Balance Sheet or Pro Forma Balance Sheet** is required. The Balance Sheet must be certified by an officer of the company, and current within the last 90 days. A blank Balance Sheet form is included in this packet for your convenience.
- ___ 3. **AFFIDAVIT**: Furnish an affidavit certifying that only new parts are used in the manufacture of new vehicles.
- ___ 4. **PHOTO**: Include photo of your manufacturing/distributing facility.
- ___ 5. **BROCHURE(S)**: Attach a sales brochure for each product line(s).
- ___ 6. **WARRANTY**: Attach copy of your product warranty and policy for reimbursement to Dealers for warranty repairs.
- ___ 8. **MSOs/MCOs**: Samples of completed Manufacturer's Statements/Certificates of Origin (front and back) for each product line manufactured or distributed in Oklahoma.
- ___ 9. **DEALER SALES & SERVICE AGREEMENT**: Submit copy of your standard Dealer Sales and Service Service Agreement.
- ___ 10. **REPRESENTATIVES**: Representatives are **individuals** employed by your company who call on dealers, prospective dealers or distributors, whether paid by salary, commission or contract. They must be licensed prior to engaging in this activity. Representative forms are enclosed.
- ___ 11. **DEALERS**: Provide names and addresses of any Dealers who will be selling your product. Only Dealers can sell to the public and they must be located and licensed in Oklahoma.
- ___ 12. **DISTRIBUTORS**: If you are applying for a Manufacturer License, provide (name, address, phone, and contact person) of any Distributors involved on behalf of applicant. A distributor is a **company** that "establishes dealer networks", "bids", or "distributes" applicant's products in Oklahoma. This company must obtain a Distributor License from this Commission, prior to engaging in that activity.
- ___ 13. **SUPPLIERS**: If you are applying for a Distributor License, provide (name, address, phone, contact person, **and** copy of Distributor Contract) with each Manufacturer.
- ___ 14. **FEES**: Manufacturer/Distributor Fee is \$200.00. Representative Fee is \$60.00 each. Checks or Money Orders only, no cash or credit cards. Fees are non-refundable unless application is denied.
- ___ 12. **DEADLINE**: Applications are considered by the Board on the second Tuesday of each month ONLY. The **deadline** to submit an application packet is the Monday eight days prior to the meeting. **NO EXCEPTIONS!**

Contact D.J. Giabbai at (405) 607-8227, ext 103, for assistance.

OKLAHOMA MOTOR VEHICLE COMMISSION

**INITIAL APPLICATION
MANUFACTURER/DISTRIBUTOR LICENSE**

Check one: Manufacturer Distributor Factory Branch Distributor Branch

1. Name _____ 2. Division _____
Business Legal Name (if applicable)

3. Physical Address _____
Street City State Zip

4. Mailing Address: _____
(if different) P.O. Box or Street City State Zip

5. The mailing address above will be used for all official correspondence. Provide the information below for the person the person to whose attention all official correspondence should be sent:

Name: _____ Title: _____ Email: _____

6. Phone (_____) _____ Fax (_____) _____ Website: _____

7. Licensing Contact _____ Title _____
Phone (_____) _____ Email _____

8. Type of Ownership: Individual Partnership Corporation LLC

Complete for each Owner, Officer and Executive Manager (including date of birth and percent ownership):
(attach separate pages if necessary)

NAME OF OFFICER	HOME ADDRESS	TITLE	D.O.B.	%
_____	_____	_____	_____	_____%
_____	_____	_____	_____	_____%
_____	_____	_____	_____	_____%
_____	_____	_____	_____	_____%

9. Has the company or any of the principals ever had a Motor Vehicle Manufacturer/Distributor or Dealer License denied, revoked or suspended in this **or** any other state? ___Yes ___No If Yes, explain:

10. Have you or any of the principals ever been convicted of a felony? ___Yes ___No

If Yes, provide the date of conviction and offense _____ and

attach copy of the OSBI Report for state charges in Oklahoma; a Federal Court Report for federal charges; or an out-of-state report for felony convictions outside Oklahoma. The Application will not be processed without this documentation. This Commission has the authority to verify, independently, the accuracy of your response.

11. Give a brief history of the business: _____

BALANCE SHEET

Company Name

As of _____

ASSETS:

Current Assets:

Cash on Hand and in Bank _____
Accounts Receivable _____
Factory Receivables _____
Notes Receivable _____

Total Cash and Receivables _____

Inventories:

New Motor Vehicles _____
Used Motor Vehicles _____
Parts and Accessories _____
Other Inventories _____

Total Inventories _____

Other Current Assets:

Total Current Assets: _____

Property, Plant, and Equipment:

Land and Buildings _____
Furniture, Fixtures, Equipment _____
Company Vehicles _____
Leasehold Improvements _____
Other _____

Total Property, Plant, & Equip: _____

Other Dealership Assets:

Total Non-Current Assets: _____

TOTAL ASSETS: _____

LIABILITES

Current Liabilities:

Accounts Payable _____
Notes Payable - Floor Plan _____
Other Short-Term Notes _____
Other Current Liabilities _____

Total Current Liabilities: _____

Long-Term Liabilities:

Mortgages Payable _____
Other Long-Term Notes _____

Total Long-Term Liabilities: _____

TOTAL LIABILITES: _____

NET WORTH / OWNERS EQUITY:

Capital Stock _____
Additional Paid in Capital _____
Retained Earnings _____
Other (Explain) _____

TOTAL NET WORTH / OWNERS EQUITY: _____

TOTAL LIABILITES AND NET WORTH: _____

I CERTIFY THAT THIS FINANCIAL INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.

Signature _____ Printed Name _____ Title _____
Corporate Officer

REPRESENTATIVE ROSTER SHEET

Representative Licenses are required for employees of a manufacturer, factory branch, distributor, or distributor branch who perform any of the following duties:

- Contact prospective Oklahoma dealers
- Supervise or contact current Oklahoma dealers
- Contact prospective or current Distributors
- Place bids with any Oklahoma state, municipal or county governments

Instructions:

1. List below all Representatives employed with your company AND the Social Security Number.
2. A Representative Application must be completed for each applicant listed below.
3. PLEASE TYPE!

Company _____ **Contact Person** _____

Phone Number _____

NAME	S.S. #	NAME	S.S. #
1. _____	_____	18. _____	_____
2. _____	_____	19. _____	_____
3. _____	_____	20. _____	_____
4. _____	_____	21. _____	_____
5. _____	_____	22. _____	_____
6. _____	_____	23. _____	_____
7. _____	_____	24. _____	_____
8. _____	_____	25. _____	_____
9. _____	_____	26. _____	_____
10. _____	_____	27. _____	_____
11. _____	_____	28. _____	_____
12. _____	_____	29. _____	_____
13. _____	_____	30. _____	_____
14. _____	_____	31. _____	_____
15. _____	_____	32. _____	_____
16. _____	_____	33. _____	_____
17. _____	_____	34. _____	_____

**Required Affidavit for all Salespersons Applications: Must verify and fill out either Option 1 OR Option 2
DO NOT COMPLETE BOTH**

Instructions:

All natural persons fourteen (14) years of age or older and present in the United States, applying for a license with the Oklahoma Motor Vehicle Commission are required, by the provisions of 56 O.S. Supp. 2007 § 71, to provide the Commission with verification of lawful presence in the United States by executing one of the Affidavits below before a notary public or other officer authorized to notarize affidavits under State law. The Commission's office provides notary service free of charge to applicants.

AFFIDAVIT VERIFYING LAWFUL PRESENCE IN THE UNITED STATES

OPTION 1: Verification of Citizenship

Affidavit of

(Applicant's Name)

_____, of lawful age, being first duly sworn, upon oath, under penalty of perjury, as follows:
(Applicant's Name)

I am a United States Citizen.

(Signature of Applicant)

Subscribed and sworn to or affirmed before me this ____ day of _____, 20 ____.

NOTARY

My Commission Expires: _____

(Seal)

My Commission #: _____

OPTION 2: Affidavit Verifying Qualified Alien Status

Affidavit of

(Applicant's Name)

_____, of lawful age, being first duly sworn, upon oath, under penalty of perjury, as follows:
(Applicant's Name)

I am a qualified alien under the federal Immigration and Naturalization Act, and am lawfully present in the United States.

(Signature of Applicant)

Subscribed and sworn to or affirmed before me this ____ day of _____, 20 ____.

NOTARY

My Commission Expires: _____

(Seal)

My Commission #: _____