DMV SLAP-W

§17A-6E-3 (b)

Motor Vehicle Salesperson License Waiver

REV 10/2016

Date ____/____/____ Salesperson License # _____ SSN _____

Name _____ Birthdate ____/____/____

Street Address _____ License/ID# _____

City, State, & Zip _____ Issuing State _____

Primary Dealer # (The dealer number that is printed on the license) _____ Type _____

Dealership Name _____

Dealer Signature _____ Dealer Printed Name _____

Additional Dealer Information

Dealer # _____ Type _____ Dealership Name_____

Certification of Applicant

I hereby certify, under penalty of perjury, that the statements Made herein are true and accurate to the best of my knowledge Information, and belief. I will engage in the business of selling Motor vehicles only for the dealer(s) for which the Dealer Licensing Section has so authorized.

_____
APPLICANT PRINTED NAME

X_____
APPLICANT SIGNATURE

____/____/____
DATE

Certification of Dealer

It is hereby certified that the above name person is employed and duly appointed as a salesperson by the undersigned, a license motor vehicle dealer.

_____
DEALER PRINTED NAME

X_____
DEALER SIGNATURE

____/____/____
DATE

COMMISSIONER SIGNATURE: _____

SEAL