

OKLAHOMA MOTOR VEHICLE COMMISSION

APPLICATION PACKET FOR MANUFACTURER OR DISTRIBUTOR

A new motor vehicle Manufacturer or Distributor must be licensed prior to establishing a dealer or distributor network in Oklahoma, or before placing bids with governmental entities. It is unlawful for a Manufacturer or Distributor to act in such capacity in Oklahoma without first obtaining a license. Sanctions such as fines or denial of license may be imposed for non-compliance.

****ITEMS IN CHECKLIST BELOW ARE REQUIRED 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*. You may submit your own signed Balance Sheet or use the enclosed Balance Sheet form.
- ___ 3. **AFFIDAVIT**: Furnish an affidavit, on your letterhead, certifying that only new parts are used in the manufacture of the new vehicles.
- ___ 4. **PHOTO**: Include photo of your manufacturing or distributing facility, showing the business sign.
- ___ 5. **WARRANTY**: Attach copy of your product warranty and policy for warranty reimbursement to Dealers.
- ___ 6. **MSOs/MCOs**: Sample of *completed* Manufacturer's Statement/Certificate of Origin (front and back).
- ___ 7. **DEALER SALES & SERVICE AGREEMENT**: Submit sample copy of the standard Dealer Agreement.
- ___ 8. **REPRESENTATIVES**: Representatives are **individuals** employed by your company who contact dealers, prospective dealers or distributors, whether paid by salary, commission or contract. They must be licensed prior to engaging in this activity. A Representative application form is enclosed, please make photo copies.
- ___ 9. **DEALERS**: Provide names, addresses, and phone numbers, of all Dealers who will be selling your product. Only Dealers can sell to the public; they must be physically located in Oklahoma and duly licensed.
- ___ 10. **IF APPLYING FOR A MANUFACTURER LICENSE**: Provide name, address, phone, and contact person for any Distributors involved on behalf of applicant if applicable. A Distributor is a **company** (anywhere in the U.S.) that "establishes dealer networks", "places bids", or "distributes your products", in Oklahoma. *Distributors are required to be licensed prior to engaging in these activities.*
- ___ 11. **IF APPLYING FOR A DISTRIBUTOR LICENSE**: Provide name, address, phone, and contact person, for each Manufacturer that you will represent; and **attach** copy of your signed Distributor Agreement with each of those manufacturers. *Manufacturers in the U.S. are required to be licensed before the Distributor is licensed.*
- ___ 12. **FEES**: Manufacturer/Distributor Fee is \$400.00. Representative Fee is \$100.00 each. Checks or money Orders only. No cash or credit cards. ***Fees are non-refundable unless application is denied.***
- ___ 13. **DEADLINE**: Applications are reviewed for consideration at a Commission Meeting, held monthly on the second Tuesday. The **deadline** to submit an application packet is the Monday ***eight days prior*** to the meeting. **NO EXCEPTIONS!** If your application is not **complete** by the deadline, it will be held over to the next monthly Commission Meeting.

Contact Marilyn Maxwell at (405) 607-8227, ext 101, for assistance.

OKLAHOMA MOTOR VEHICLE COMMISSION

**INITIAL APPLICATION
MANUFACTURER AND/OR DISTRIBUTOR LICENSE**

Check one: ___ Manufacturer ___ Factory Branch ___ Distributor ___ Distributor Branch

1. DBA Name _____

2. Legal Business Name _____
(if different)

3. Physical Address _____
Street City State Zip

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

5. Main Phone _____ 6. Website _____
Name Direct Phone # E-Mail

7. Division Head _____
Contact Person _____
(filling out this form)

8. Ownership Type: Individual Partnership Corporation LLC LP

9. Ownership Structure (check one): Owned by parent company: _____
 Publicly Owned
 Privately Owned (if this is checked complete Question #10)

10. If privately owned, complete below for each Owner, Officer and Executive Manager: (attach separate pages if necessary)

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

11. 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:

12. Have you or any of the principals ever been convicted of a felony? ___ Yes ___ No **If Yes**, complete below:
Who? _____ **Where?** _____ **When?** _____

(circle one) **Federal** or **State Charge** **Convicted of:** _____

****If yes, attach** copy of a Criminal History Background Report relating to the felony charge(s). The Application will not be processed without this documentation. This Commission has the authority to verify, independently, the accuracy of your response.

BALANCE SHEET

Company: _____

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 PLUS TOTAL 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 or CONTRACT PERSONNEL of a manufacturer, factory branch, distributor, or distributor branch who perform any of the following duties:

- Contact prospective Oklahoma Dealers
- Contact or supervise existing Dealers regarding only the Sales Process or Dealer Development
- Contact prospective or current Distributors
- Place bids with any Oklahoma State, Municipal or County Governments

Instructions:

1. List below **ALL** Representatives to be licensed.
2. Each person listed below **must** complete a Representative Application.
3. Only provide the **LAST 4 DIGITS** of the Social Security Number.
4. Please type or print legibly!

Company _____ Contact Person _____
Phone Number _____

NAME	S.S. # (last 4 digits only)	NAME	S.S. # (last 4 digits only)
1. _____		16. _____	
2. _____		17. _____	
3. _____		18. _____	
4. _____		19. _____	
5. _____		20. _____	
6. _____		21. _____	
7. _____		22. _____	
8. _____		23. _____	
9. _____		24. _____	
10. _____		25. _____	
11. _____		26. _____	
12. _____		27. _____	
13. _____		28. _____	
14. _____		29. _____	
15. _____		30. _____	

