DL	B-4A, revised 09-2021
	NEBRASKA MOTOR VEHICLE INDUSTRY LICENSING BOARD
	301 CENTENNIAL MALL SOUTH, P.O. BOX 94697, LINCOLN, NE 68509
	Telephone: (402) 471-2148 Fax: (402) 471-4563 <u>https://mvdealerbd.nebraska.gov</u> Email: <u>mvilb.contact@nebraska.gov</u>
	FEE: <u>\$20.00</u>
	(Collected after inspection and approval)
Ар	plication for MOTOR VEHICLE OR TRAILER DEALER SUPPLEMENTAL LICENSE (The Supplemental location must be within the same County as the Principal location.)
De	aler License Number:
Ap	plication of for a license to engage in (Dealership Name)
the	(Dealership Name) business of selling or exchanging motor vehicles or trailers in accordance with the Motor Vehicle Industry Regulation Act, the es and regulations adopted and promulgated by the Board, and any amendments to the act and the rules and regulations, to date.
1.	Principal Address of Dealership:
2.	Address of Supplemental Location(City, State, Zip Code)
	County: (Street) (City, State, Zip Code) If the above address is a rural location, please give directions to find the dealership:
3.	Does this supplemental location conform to applicable zoning laws? Supply a zoning permit or letter from the proper authority confirming your zoning compliance.
4.	(a) Your declared office hours:a.m. top.m (b) Telephone number at supplemental location: ()
5.	Name and phone number of contact person
6.	Indicate whether the proposed location is owned or leased by the applicant If the location is leased, a copy of the lease that does not end before December 31st of the license year must accompany this application.
7.	Will there be one contiguous area for the display of at least ten or more motor vehicles, trailers or motorcycles in a presentable manner where this business is operated?
8.	Will all motor vehicle and/or trailer records be kept separately from other business or personal records?
9.	Submit with this application a photograph of the place of business, showing the permanently erected dealership sign in the photo. The dealership name on the sign must be in letters at least eight inches in height.
sт	ATE OF
Co	unty of
(Pri	, being first duly sworn, upon oath deposes and says: That he/she is, ned name of owner, partner, corporate officer or LLC member)
-	applicant who makes the above and foregoing application, that he/she has read the same, knows the contents thereof, and that all
	tements therein contained are true.
	(Signature of Applicant)

SUBSCRIBED in my presence and sworn to before me this _____day of _____, ____

(Notary Public)

Submit the completed application with the supporting documents to our office. It will be reviewed and forwarded to one of our field investigators who will contact you to schedule an inspection.

After the inspection and approval, send to our office the Inspection Report, any additional required items, and the Fee made payable to the Motor Vehicle Industry Licensing Board (please do not mail cash).