

Application For Dealer or Wholesaler License Name Change

Check Applicable Box: <input type="checkbox"/> Motor Vehicle Dealer <input type="checkbox"/> Powersports Dealer <input type="checkbox"/> Business Disposal Dealer			
Colorado law requires notification of a change of license name (DBA) not less than 10 days prior to the change. If notification is received after the effective date of the change, the late fee is due. Attach to this form the following: <ul style="list-style-type: none"> • Attach original bond rider which amends the principal line to reflect the licensed entity and the new DBA • Submit a letter from the manufacturer acknowledging the name change and stating the Manufacturer's Certificate of Origin (MCO) will be issued in the new name. (Franchised dealers only) • Submit a copy of the new trade name registration filed with the Colorado Secretary of State's office. The website address is www.sos.state.co.us • Make check payable to the Colorado Department of Revenue. Mail check to the address listed at the top of this form. The physical address is: 1697 Cole Blvd., Suite 200-A, Lakewood CO 80401 			
Current License Name			Dealer Number
Dealer Email			Business Phone Number ()
Location Address			
City		State	ZIP
New License Name		Effective Date	
Dealers (new, used and auction)			
A line for each numbered requirement must be initialed or the application will be rejected or delayed. <ol style="list-style-type: none"> 1. _____ Permanent sign in place or _____ Temporary sign in place with permanent sign ordered. 2. _____ Sign displays new dealer licensed name (DBA). The sign or device must identify the dealer by its licensed name and be clearly visible to the public from outside the building that houses the dealership or from the public entry area of the building that houses the dealership. 			
All Applicants Must Read, Sign and Date this Section			
I declare under penalties of perjury in the second degree (Class 1 Misdemeanor) that the above information is true and accurate. I realize that my place of business is subject to inspection and any false statements regarding the above requirements could subject my license or application to denial, suspension or revocation. I, as owner, co-partner, LLC member/manager, or corporate officer have authority to sign this request.			
Signature (owner, partner, LLC member/manager, or corporate officer)			Title
Printed Name			Date (MM/DD/YY)
For Office Use Only	Effective Date (MM/DD/YY)	Process Date (MM/DD/YY)	Fee Required & Submitted \$