State of Florida
Department of Highway Safety and Motor Vehicles
Division of Motor Vehicles – Bureau of Field Operations
Neil Kirkman Building, Tallahassee, Florida 32399-0500

Registration of Mobile Home Dealer's Salesperson(s)

☐ Adding a Salesperson ☐ Deleting a Salesperson ☐ Change of Residential Address

DMV USE ONLY

License Number
Dealer FRVIS Customer Number
Date Received in the Regional Office
Date Completed in the Regional Office
Salesperson's FRVIS Customer Number

Mobile Home Dealer Information:

Dealer's Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Dealer License Number: _____

Salesperson Information:

Salesperson's Name: _____

Date of Birth: _____

(Include month, day, and year)

Driver License Number: _____

Residence Address: _____

(Post office box may not be used in lieu of physical residence address)

City: _____ State: _____ Zip Code: _____

Home Telephone Number: _____

Date of Hire: _____

(Include month, day, and year)

Salesperson Information Being Deleted:

Salesperson's Name: _____

Driver License Number: _____

Residence Address: _____

City: _____ State: _____ Zip Code: _____

Home Telephone number: _____

Date of Termination/Separation: _____

(Include month, day, and year)

"Under penalty of perjury, I do swear or affirm that all the information contained in this application is true and correct.

_____

Signature of Principal/Officer Typed Name and Title Date