



**MOTOR VEHICLE DEALER  
TWO YEAR LICENSE APPLICATION**  
Wis. Stat. Ch. 218

Wisconsin Department of Financial Institutions  
Licensed Financial Services Section  
PO Box 7876  
Madison, WI 53707-7876  
(608) 261-7578 | [www.dfi.wi.gov](http://www.dfi.wi.gov)

<b>Application Type</b> (check all that apply) <input type="checkbox"/> New dealer license application <input type="checkbox"/> Buyout of existing dealer <input type="checkbox"/> Amendment of current dealer license (no fee if relocating within the same municipality)		Dealer Number (blank if new application)
If amending a current dealer license, explain what is being amended (i.e., business address, branch, subplot, name(s) of owners/LLC members, business entity type, etc.).		
Legal Business Name		
Trade Name(s) or DBA(s)		
Business Address		Business PO Box
Business City	Business State	Business ZIP
Name & title of all owners, partners, association members, corporate officers/shareholders, LLC members/managers (attach additional pages if necessary).		
Contact Person Name(s)	Contact Phone Number(s) (     )     ) (     )     )	Contact Email(s)
Types of Vehicles to be Sold (check all that apply) <input type="checkbox"/> Autos <input type="checkbox"/> Trucks <input type="checkbox"/> Motorcycles <input type="checkbox"/> Other (please list below)		
Was there a licensed dealer at this same location previously this year? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, dealer name:		
<input type="checkbox"/> Yes <input type="checkbox"/> No Does your dealership write credit insurance?		
<input type="checkbox"/> Yes <input type="checkbox"/> No Does your dealership sell Guaranteed Asset Protection (GAP)?		
<b>Fees - Check only ONE box</b> indicating whether financing or leasing will be offered at your dealership: 1. <input type="checkbox"/> During the next two years our dealership will sell ALL vehicles on a CASH ONLY basis. <b>\$20 fee due</b> 2. Our dealership originates retail installment sales contracts and/or consumer leases: <input type="checkbox"/> a. All contracts/leases we originate are sold or transferred to a third party. <b>\$100 fee due</b> <input type="checkbox"/> b. Some or all contracts or leases we originate are retained by our dealership. <b>\$100 fee due</b>		
<b>Submission Instructions:</b> 1. Write a check for the fee indicated in box above. Make checks payable to the "Department of Financial Institutions". 2. Print a completed and signed version of this form. 3. Mail the check and this form to the address listed in the top right corner of this form. 4. Complete and submit form <a href="#">MV2186</a> Motor Vehicle Dealer Two Year License Application to WisDOT		

X \_\_\_\_\_  
 (Signature of Authorized Dealership Agent)     (Title) (Date – mm/dd/yyyy)

**Notice:** This form is required under Wis. Stat. ch. 218. Refusal to fully and accurately provide the above information may result in the revocation of a license. This document can be made available in alternate formats upon request to qualifying individuals with disabilities.