STATE BOARD OF VEHICLE MANUFACTURERS, DEALERS, AND SALESPERSONS
P.O. BOX 2649, HARRISBURG, PA 17105-2649
TELEPHONE: 717-783-1697 FAX: 717-787-0250
www.dos.state.pa.us/vehicle

REQUEST TO INACTIVATE A VEHICLE SALESPERSON LICENSE

Licensee Name: _____

License Number: _____

Date of Request: _____

Person Making Request Is: _____ Licensee _____ Employer

Employer information: _____
Company Name Company License Number

Signature of Person Making Request: _____

Original License Enclosed? _____ Yes _____ No

If original wall certificate is in possession of person completing this form, it *must* be included when returning the request.

There is no fee required to place a license into inactive status.

This license may be retrieved at any time. To do so, complete application **SPOA #2606 SALESPERSON CHANGE OF EMPLOYER/REACTIVATING LICENSE APPLICATION**, in its entirety and return to the Vehicle Board. The most recent version is available at www.dos.state.pa.us/vehicle.

This form may *not* be used for a business license. To place a business out of business, please contact the Board for the proper instructions.