



SALESPERSON INITIAL LICENSE APPLICATION

INSTRUCTIONS AND REQUIREMENTS

Before completing any part of this application, make sure this is the **most recent** version by comparing it with the one posted on the Board's website.

THIS APPLICATION MAY ONLY BE USED BY AN INDIVIDUAL WHO HAS **NEVER** BEEN ISSUED A VEHICLE SALESPERSON (MV) LICENSE BY THE PENNSYLVANIA VEHICLE BOARD. TO CHANGE EMPLOYER OR REACTIVATE AN EXISTING VEHICLE SALESPERSON LICENSE, SUBMIT APPLICATION SPOA 2606.

This application and all required documents must be submitted to the **Vehicle Board at PO Box 2649; Harrisburg, PA 17105-2649**. All vehicle salesperson licenses expire May 31st of each odd numbered year. DELAYS may occur in the processing of this application if submitted during the beginning of the license renewal period (March 1 of odd-numbered year and July 1 of the same year). Upon receipt of a correctly completed application and all required documents, your application will be processed as soon as possible. All salesperson licenses will be issued to the **primary location** (VD license address). It will be the dealer's responsibility to distribute salesperson licenses to the appropriate branch office locations for employees who desire to work at these locations.

An individual who holds a vehicle dealership license as a partnership, corporation or any other form of business entity other than a sole proprietorship **must** also hold a valid, current vehicle salespersons license in order to conduct vehicle sales. An individual who holds a vehicle dealership license as a sole proprietor is not required to also hold a vehicle salesperson license in order to engage in vehicle sales.

INSTRUCTIONS

- Application responses must be typed or printed neatly in black or blue ink.
- All questions in all sections **MUST** be answered **completely and truthfully**. Statements are made under oath and are subject to Board investigation. Falsification of answers or failure to answer any question may constitute grounds for refusing or taking disciplinary action against a license.
- **Attach** the following documents to this application:
 1. **A check or money order (cash is not acceptable)** for the amount below made payable to the Commonwealth of Pennsylvania

\$25.00 Initial Licensure fee
If multiple applications are submitted, a separate check or money order is required for each application.

The application fee is **NON-REFUNDABLE** and **NON-TRANSFERABLE** regardless of the issuance of a license. A \$20.00 processing fee will be charged for any unpaid check regardless of the reason.
 2. A **COMPLETED** State Police Background Check (Request for Criminal History Check) **FROM EACH STATE IN WHICH THE APPLICANT HAS RESIDED IN THE FIVE YEARS IMMEDIATELY PRECEDING THE DATE OF THE APPLICATION**. If you answer **YES** to question 16 on the application, then you must submit a completed State Police Background Check from the state in which the conviction occurred regardless of whether you have ever resided in that state. Background checks that reflect "Request under Review" will not be accepted.
 - Criminal record checks for Pennsylvania residents may be obtained on-line at <https://epatch.state.pa.us> or by mail by contacting the Pennsylvania State Police.
 - **Out-of-state** residents should consult the Board's web page for information about obtaining an out-of-state background check at: www.dos.pa.gov/vehicle, click on General Board Information and click Criminal Record Check.
 - Criminal record checks must be received within 90 days of the application date and must include the social security number and birth date of the applicant. Those older than 90 days will be returned for new submissions. In the interim, the application will not be processed.
 - Any questions about your background check should be directed to the State Police.

- If you have been convicted* of a *felony* or *misdemeanor* offense (summary offenses are not included), submit the following information for EACH conviction, **regardless** of the time elapsed since the conviction:
 - Copies of the criminal complaint and affidavit of probable cause, criminal information or indictment, sentencing order, and transcript of a guilty plea colloquy, if any, certified by the court in the county where the conviction occurred;**
 - If the court documents do not categorize the offense as a felony or misdemeanor, a letter from the Court explaining the grading of the offense;
 - A letter from the Probation Office, on agency letterhead, **signed and dated within 90 days** of receipt in the Board office, providing the current probationary status and/or completion date (if applicable)**;
 - Employment history or resume;
 - A detailed description (in applicant's own words) of the circumstances surrounding the conviction, the basis for the conviction, and the disposition of the conviction;
 - A letter from the employing dealer, on company letterhead, attesting to his/her knowledge of the conviction, **signed and dated within 90 days** of receipt in the Board's office;
 - Two letters of reference from individuals not related to or residing with the applicant attesting to the applicant's character, **signed and dated within 90 days** of receipt in the Board office.

***For purposes of these instructions**, a conviction includes a finding or verdict of guilt, a plea of guilty or *nolo contendere*, or a disposition of probation without verdict, disposition in lieu of trial, or Accelerated Rehabilitation Disposition. The Board will not deny a license based upon a disposition of PWV, disposition in lieu of trial or ARD, but will monitor the applicant's compliance to confirm that the disposition is not changed to a conviction after the license has been issued.

****If the required documents are not available**, please provide an original letter on business letterhead, **signed and dated within 90 days** of receipt in the Board's office, from the proper authority confirming documents are not available.

3. Each salesperson shall be licensed to only one dealership at any one time. All salesperson licenses will be issued to the **primary location** (VD license address). It will be the dealer's responsibility to distribute salesperson licenses to the appropriate branch office locations for employees who desire to work at those locations.
4. If you have fulfilled the licensing requirements, your license will be mailed to the main office of your employing dealership. If not, a discrepancy letter indicating what is still needed will be mailed to your prospective employing dealership's main office.
5. **SUBSEQUENT DISCIPLINARY ACTION OR CRIMINAL CONVICTION.** If disciplinary action is taken against the licensee at any time following the date of the criminal background checks, these actions must be reported to the Board within 30 days of the action. Refusal of licensure or disciplinary action may result from these actions or the failure to make a timely report.
6. **Please be sure to keep a copy of your completed application packet for your records.**
7. To check the status of your application or to apply online visit www.mylicense.state.pa.us
8. If a pending application is older than one year from the date submitted online or the paper application is signed by the applicant and the applicant wishes to continue the application process, the Board shall require the applicant to submit a new application including the required fee.
9. In order to complete the application process, many of the supporting documents associated with the application cannot be more than 6 months old (from the date of issuance). All background check documents cannot be older than 90 days old (from the date of issuance).
10. The Board will retain a copy of all old application records and attachments. Applicants will be notified of the above timeframes for pending applications.

YOU MAY NOT PRACTICE AS A VEHICLE SALESPERSON UNTIL LICENSED BY THE BOARD



SALESPERSONS INITIAL LICENSE APPLICATION

1. Applicant's name: _____
(LAST) (FIRST) (MI)
If you have ever been licensed under a different name, you must attach to this application court documents verifying the name change.

2. Applicant's current home address: _____
(STREET) (CITY) (STATE & ZIP CODE)

a) List previous home addresses for the past five years ***(must be completed)***:

3. Applicant's social security number: _____

4. Applicant's date of birth (month/day/year): ____ / ____ / ____

5. Applicant's home telephone number:(____ ____ ____) ____ ____ - ____ ____ ____

6. Applicant's email address: _____

FOR THE REQUIRED INFORMATION BELOW, PLEASE PROVIDE THE EMPLOYING DEALER'S NAME, LICENSE NUMBER AND MAIN OFFICE ADDRESS EXACTLY AS IT APPEARS ON THE DEALER'S LICENSE.

7. Employing dealership's name as it appears on VD license: _____

8. Employing dealership's primary location address: _____
(STREET) (CITY) (STATE & ZIP CODE)

9. Employing dealership's telephone number: (____ ____ ____) ____ ____ - ____ ____ ____

10. Employing dealership's license number (write "PENDING" if dealership is submitting an initial application for the business):

VD _____ **Be sure you list VD#, not DIN#**

11. Have you ever been issued a Vehicle Salesperson (MV) License by the Pennsylvania Vehicle Board?
____ YES ____ NO If YES, license number: **MV** _____

If you have answered YES to this question, you are submitting the wrong application. Submit application SPOA 2606.

12. Do you hold, or have you ever held, a license, certificate, permit, registration or other authorization to practice a profession or occupation in any state or jurisdiction?
____ YES ____ NO

If you answered yes to the above questions, please provide the profession and state or jurisdiction.
Profession: _____ State: _____

13. Have you had disciplinary action taken against a professional or occupational license, certificate, permit, registration or other authorization to practice a profession or occupation issued to you in any state or jurisdiction or have you agreed to voluntary surrender in lieu of discipline?
____ YES ____ NO

14. Do you currently have any disciplinary charges pending against your professional or occupational license, certificate, permit or registration in any state or jurisdiction?
___ YES ___ NO
15. Have you withdrawn an application for a professional or occupational license, certificate, permit or registration, had an application denied or refused, or for disciplinary reasons agreed not to apply or reapply for a professional or occupational license, certificate, permit or registration in any state or jurisdiction?
___ YES ___ NO
16. Have you been convicted (found guilty, pled guilty or pled nolo contendere), received probation without verdict or accelerated rehabilitative disposition (ARD), as to any criminal charges, felony or misdemeanor, including any drug law violations? Note: You are not required to disclose any ARD or other criminal matter that has been expunged by order of a court.
___ YES ___ NO *If YES, please refer to the above instructions concerning the submission of a completed State Police Criminal Background Check.*
17. Do you currently have any criminal charges pending and unresolved in any state or jurisdiction?
___ YES ___ NO
18. Have you ever sold vehicles or mobile homes in Pennsylvania for a dealer within the past five (5) years?
___ YES ___ NO *If YES, please give details including dates, names of dealerships and locations (attach a separate sheet if necessary.)*

19. Have you ever had a Vehicle Salesperson license suspended or revoked? ___ YES ___ NO
Where? _____ When? _____
Why? _____
20. Submit a check or money order in the **required amount of \$25.00** made payable to the "Commonwealth of PA." (Cash is not acceptable. If multiple applications are submitted, a separate check or money order is required for each application.)
NOTE: The required fees are fees for the processing of the application and are not refundable. These fees are required regardless of issuance of a license. A processing fee of \$20.00 will be charged for any check returned unpaid by your bank regardless of the reason for non-payment.

21. **EMPLOYER'S CERTIFICATION**

I do hereby request that a license be granted to _____ to operate at this facility.
(Name of applicant)
I believe the applicant to be honest, trustworthy, truthful, and of good repute.

Signature of Dealer Representative	Print Name	Date
------------------------------------	------------	------

Designated contact person (if different than above) _____

22. **APPLICANT'S CERTIFICATION**

I hereby certify that I have read the Board of Vehicles Act, Act of December 22, 1983, P.L. 306, No. 84, as amended, 63 P.S. §§818.1 – 818.37, and the Board's regulations, 49 Pa. Code §§19.1 – 19.38, and that I will abide by the Act and the regulations while practicing in the Commonwealth of Pennsylvania.

I verify that this application is in the original format as supplied by the Department of State and has not been altered or otherwise modified in any way. I am aware of the criminal penalties for tampering with public records or information under 18 Pa.C.S. § 4911.

I verify that the statements in this application are true and correct to the best of my knowledge, information and belief. I understand that false statements are made subject to the penalties of 18 Pa.C.S. § 4904 (relating to unsworn falsification to authorities) and may result in the suspension, revocation or denial of my license, certificate, permit or registration.

Applicant's Signature

Date

Disclosing your Social Security Number on this application is mandatory in order for the State Boards to comply with the requirements of the Federal Social Security Act pertaining to Child Support Enforcement, as implemented in the Commonwealth of Pennsylvania at 23 Pa.C.S. § 4304.1(a). At the request of the Department of Human Services (DHS), the licensing boards must provide to DHS information prescribed by DHS about the licensee, including the social security number.

I authorize the following organization and its employees to act as my agent to file this application on my behalf, and to receive correspondence and communications from the Board. I understand that the Board will also send copies of communications directly to me and my employing dealer.

Name of Organization

Address of Organization

Contact Person at Organization Telephone Number Fax Number

Signature of Applicant Print Name Telephone Number Fax Number

I accept authorization of the applicant to act as agent for the submission of this application and to receive correspondence and communication from the Board. I understand that the Board will also send copies of communications directly to the applicant and the employing dealer.

Signature of Contact Person Print Name Telephone Number Fax Number

YOU MAY NOT PRACTICE AS A VEHICLE SALESPERSON UNTIL LICENSED BY THE BOARD