

OKLAHOMA NEW MOTOR VEHICLE COMMISSION

APPLICATION FOR NEW MOTOR VEHICLE  
SALESPERSON CERTIFICATE OF REGISTRATION

REGISTRATION REQUIRED FOR ANY PERSON INVOLVED IN THE SALE OR FINANCING OF NEW VEHICLES

PLEASE PRINT CLEARLY!

1. CHECK ONE:  Sales/Finance  Dealer's Spouse  Dealer Key Personnel

2. FULL NAME:   
(First, Middle Initial and Last)

3. ADDRESS:   
Street City State Zip

4. SSN:  5. Birth Date:  6. HOME/CELL: (  )   
(Last 4 Digits Only!)

7. DEALERSHIP NAME (DBA):  Jim Glover Chevrolet

8. DEALERSHIP ADDRESS:  707 W 51st Street Tulsa, OK 74107  
Street City State Zip

9. DATE HIRED:  10. JOB TITLE:

APPLICANT ATTESTATION: I agree to abide by the Laws and Rules of the State of Oklahoma and the Motor Vehicle Commission. I certify under penalty of perjury that the answers and information contained herein are true and correct.

Applicant Signature **Date:**

EMPLOYER'S ENDORSEMENT

I have read the foregoing answers by the above Applicant and believe them to be true to the best of my knowledge. **This Applicant, Representing My Dealership,** is recommended as trustworthy and a person who will abide by the provisions of the laws and the rules and regulations governing the sale of new motor vehicles, and is being employed as a salesperson, selling exclusively for the undersigned employer.

Signature of Dealer, General Manager or Corporate Officer  General Manager  
Title

Mazen Daouk   
Print Name Date

Submit Registration application and \$25.00 fee to:  
Oklahoma New Motor Vehicle Commission, 4334 N.W. Expressway, Suite 183,  
Oklahoma City, OK 73116, 405-607-8227