



Personal History And Salesperson Application

ITD 3171 (Rev. 08-11)
itd.idaho.gov

Idaho Transportation Department - Vehicle Services
PO Box 34; Boise, ID 83731-0034

☞ Enclose a \$26.00 application fee and a completed application for each salesperson.

Once the application is processed, a notification and thirty-day temporary license will be mailed to the sponsoring dealership which will direct the applicant to a county office to have their picture taken. The County will require an additional \$10.00 fee for each applicant (including owners) at the time their picture is taken. If the applicant is the owner, they will receive only one picture ID for their **primary** dealership, regardless of ownership of multiple vehicle dealerships.

Check appropriate box(es):			
<input type="checkbox"/> Original Application	<input type="checkbox"/> Full-time Salesperson	<input type="checkbox"/> Renewal	<input type="checkbox"/> Add Sponsoring Dealer
<input type="checkbox"/> Owner/Officer (No charge)	<input type="checkbox"/> Part-time Salesperson	<input type="checkbox"/> Change Sponsoring Dealer	<input type="checkbox"/> Duplicate (Lost Card - \$18)

Idaho Code - *Idaho Code 49-1602(1)* states that the Department may refuse to issue a license to an applicant who has ever been convicted in a court of record in this state of a violation of a law, provision, or rule and regulation promulgated for this act. The applicant shall not practice any fraud; make any fraudulent representation; violate any of the provisions of *Idaho Code Title 49, Chapters 2, 4, 5 or 16; or Title 48, Chapter 6*; any rules and regulations promulgated by the Idaho Transportation Department; federal motor vehicle safety standards, or odometer fraud.

Are you currently, or have you previously been licensed as a vehicle/vessel salesperson, dealer, dismantler, or transporter in Idaho or any other state?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
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If Yes, Enter	Idaho Salesperson Number	Date		
and/or	Out-of-State Salesperson Number	Date	State	Dealership Number
	Dealership Name	Dealership Location		

Have you ever had a Vehicle Dealer, Salesperson, or Manufacturer License revoked, suspended, or subjected to other disciplinary action; or were you ever a partner, officer, director, or stockholder in a firm whose license was revoked in Idaho or any other state?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	If yes, explain the circumstances on the back of this form.
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Name as it Appears on Your Driver's License (Last, First, Middle) Please Print or Type							
Driver's License Number		Driver's License State		Social Security Number		Date of Birth	
Sex	Height	Weight	Eye Color	Hair Color		Daytime Phone Number	
Residence Address (Number and Street - No PO Box)				City		State	Zip
Mailing Address (If different from above)				City		State	Zip

THE UNDERSIGNED hereby makes application for a sales license in accordance with the provisions of the Idaho vehicle dealer's license and salesman's act.

I affirm under penalty of license forfeiture that the answers and information contained herein are true and correct to the best of my knowledge and belief. **This form must be completed in full or it will be returned.**

Applicant's Signature X	Date	Primary Dealer Number
Dealership Name	Dealership Location	
Additional Dealer No.(s) (part-time only)		<input type="checkbox"/> Inactive Owner/Officer/Director – No ID Needed

Sponsoring Dealer Certification for Sales Personnel		
Sales Position: <input type="checkbox"/> Part-time* <input type="checkbox"/> Full-time** <input type="checkbox"/> Temporary Off-site Sales License		
I hereby certify that a background check has found the applicant suitable for a salesperson position and that he/she is an employee over 18 years of age. I understand that this application is invalid until submitted to ITD and fees are paid.		
Printed Name of Authorized Dealership Representative	Signature of Authorized Dealership Representative X	Date

*Part-time = Less than 30 hours per week

**Full-time = 30 hours or more per week