

# Application for Idaho Vehicle or Vessel Manufacturer/Distributor License Idaho Transportation Department

### Instructions

This packet contains the forms required to license as a vehicle or vessel manufacturer/distributor in Idaho. Idaho requires manufacturers/distributors who are annually building five (5) or more trailers over 2,000 pounds or distributing vehicles/vessels that require a title, to obtain a manufacturer/distributor license. If these products are being sold retail to the public the manufacturer/distributor is also required to obtain a dealer license (form ITD 3170). The manufacturer/distributor licenses provide the state with a bond.

The state requires the manufacturers of vehicles/trailers to submit a proper Vehicle Identification Number (VIN) configuration. The VIN is a seventeen (17) character number that contains an identifier for the business. If motorcycles are used <u>on road</u> they must also be FMVSS/EPA approved for use on Idaho roads. Manufacturers/distributors of vessels are required to submit a proper Hull Identification Number (HIN) configuration. The HIN is a twelve (12) character serial number that uniquely identifies the vessel.

The state also requires that the manufacturer submit for approval a sample Manufacturers Certificate of Origin (MCO) (also known as MSO, or Manufacturers Statement of Origin) on approved safety paper. The Dealer Operations Program Supervisor of the Idaho Transportation Department will determine if the MCO or MSO meets the minimum standards required. Motorcycle MCO or MSO must indicate if they qualify for on road or off road use. For more detailed information regarding the VIN/HIN configurations or Idaho's standards for the MCO, please contact Dealer Services at (208) 334-8681.

If the applicant's business is in the name of a Corporation, Limited Liability Corporation (LLC), or Limited Liability Partnership (LLP), a copy of the status from the Secretary of State's Office must be submitted. If the applicant is an individual company or corporation doing business under any other name, an assumed or fictitious name filing must be applied for and recorded with the Secretary of State's Office. Submit verification of the filing with this application.

A certificate of liability insurance is required for insurance in the amount of not less than \$25,000 bodily injury or death for one person or \$50,000 for two people and \$15,000 for injury or destruction of property. (Effective July 01, 2006)

Submit the completed application, required attachments, and fees to:

Vehicle Services - Dealer Licensing Idaho Transportation Department PO Box 34 Boise ID 83707-0034

Upon receipt of the required information and fees, the Dealer Licensing Unit will assign a Motor Vehicle Investigator to inspect the principal place of business for compliance with the Dealer/Salesman Licensing Act and ITD Rules.

Failure to complete all the necessary forms and supply the required information may delay this process.

Licensing Fees

Initial Application New Idaho Manufacturer/Distributor	\$190.00
Change of Location	\$ 44.00
Duplicate Documents (Each)	\$ 18.00

#### **Fee Calculation**

Manufacturer or Distributor License\$	
Change of Location\$	
Duplicate Documents (Each)\$	
Total Amount Due\$	
Total Amount Due       \$         *All credit card transactions are subject to a s	ervice fee

#### **Idaho Checklist**

Fees enclosed (make check payable to Idaho Transportation Department)
Application completed in full with all signatures of the owners/officers/directors notarized
Proof of Corporate, LLC, or LLP Status from the Secretary of State's Office and a list of officers
Proof of fictitious or assumed name recording (including all owners' names) from the Secretary of State's Office
VIN/HIN configuration
MCO/MSO complying sample
Personal History form (ITD 3181) for each owner/officer/director/partner
Liability Insurance Certificate



List the name and title of each individual owner, partner, officer, or stockholder of the business. A Personal History (ITD 3181) is required for each individual listed below (attach a separate sheet, if necessary).

Name	Title	Name	Title
Name	Title	Name	Title
Name	Title	Name	Title



Complete appropriate section below. All signatures must be notarized.

Section I Individual Includes both husband and wife.

I certify under Penalty of Perjury that I am t	the sole owner of (Name of E	Business)	
	and that all answers and in	information contained in this application are true and correc	t.

I hereby appoint the Director of the Idaho Transportation Department as my true and lawful agent for the purpose of the service of process(es) in any action(s) that may hereafter be commenced against me and/or my manufacturing business for alleged violations of *Chapter 16 Title 49 Idaho Code*. This agency shall continue during the period covered by any license that may be issued to me and so long thereafter as I may be made to answer for any violations of the aforementioned *Idaho Code*.

Signature

Signature

## Section II (Check One) Partnership Limited Liability Partnership

and that no other person is associated in the ownership of the business, and that al answers and information contained in this application are true and correct.

We hereby appoint the Director of the Idaho Transportation Department as our true and lawful agent for the purpose of the service of process(es) in any action(s) that may hereafter be commenced against us and/or our manufacturing business for alleged violations of *Chapter 16 Title 49 Idaho Code*. This agency shall continue during the period covered by any license that may be issued to us and so long thereafter as we may be made to answer for any violations of the aforementioned *Idaho Code*.

Signature	Signature	Signature
Signature	Signature	Signature

## Section III (Check One) Corporation Limited Liability Corporation

All owners, partners, or a majority of corporate officers must sign.

I/We certify under Penalty of Perjury that	I/We certify under Penalty of Perjury that (Name of Business)			
		Idaho and is authorized to transact business in Idaho,		
and that all answers and information contained				
		 ransportation Department as my/our true and lawful		
		eafter be commenced against my/our manufacturing		
		y shall continue during the period covered by any		
	on and so long thereafter as I/we may be	made to answer for any violations of the aforementioned		
Idaho Code.				
Officer's Signature	Officer's Signature	Officer's Signature		
Officer's Signature	Officer's Signature	Officer's Signature		
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		· · · · · · · · · · · · · · · · · · ·		
STATE OF IDAHO	)			
	) ss:			
COUNTY OF	) 33.			
	)			
On this day of	boforo mo ti	a undersigned a Notony Dublic in and for acid		
On thisday of		ne undersigned, a Notary Public in and for said		
noreanally annoured	state,	known to ma ar		
personally appeared		, known to me or		
proved to me to be the person(s) who execute				
IN WITNESS WHEREOF, I have hereunto se	et my hand and affixed my official seal th	ne day and year the certificate was first above		
written.				
	NOTARY F	UBLIC for the State of Idaho		
(SEAL)	Residing at			
	My commission expires			