

Application for Out-of-State Distributor License Idaho Transportation Department

ITD 3188 (Rev. 1/24) dmv.idaho.gov

Mail completed application to: Idaho Transportation Department

PO Box 34

Boise ID 83707-0034

Out-of-State Distributor Information									
Company Name		DBA (If different from Company Nar	DBA (If different from Company Name)						
Location Address		City	State	Zip					
Mailing Address (if different from above)		City	State	Zip					
Mailing Address (if different from above)		City	State	Σιρ					
Owner/Officer's Printed Name		Contact Person's Printed Name		Dealer License #					
Area Code/Phone Number (Include extension)	Area Code/Fax Number	Email Address							
Product Information – If more space r	needed submit additi	onal list							
Distributed Product Name(s)	leeded, Sabiliit additi	Orial list							
, ,									
Type of Vehicle(s)									
Charle List of Dogwoods to Cubarit									
Check List of Documents to Submit									
☐ The completed application form ITD 3188									
☐ The completed application of the 2 too									
☐ The fee of \$190.00 for a new license									
The fee of \$44.00/each for representative licenses									
The lee of \$44.00/cach for representative licenses									
A copy of the distributor/business license from the state where the business is located									
For distributors: letter of authorization from each manufacturer allowing to distribute the product in Idaho, if applicable									
1 of distributors, letter of authorization from each manufacturer allowing to distribute the product in idano, if applicable									
An original, complete Manufacturer's Statement or Certificate of Origin (MSO / MCO) for each distributed product (may									
be voided or marked as "sample")									
· ············ /									
A list of each of the franchised or authorized dealers in the state of Idaho									
Fees Submitted *All credit card transactions are subject to a 3% Access Idaho service fee.									
New Distributor License - \$190.00		\$							
Distributor Representative License(s) @ \$44.00 each = \$									
· · · · · · · · · · · · · · · · · · ·	no. of licenses)								
Distributor Authorized Representative's Printed Na		Il Enclosed \$ tor Authorized Representative's Signature	<u>—</u> In	ate					
Distributor / tariorized / toproserrative s / filled Ne	X	o, , tationzou i toprosoniativo s oigilature		u.u					





Personal History and Application for Idaho Factory Representative

Idaho Transportation Department Dealer Operations PO Box 34; Boise, ID 83707-0034

Enclose a \$44.00 application fee with a completed application for each factory representative *

•	·					
Check appropriate box(es): Original Application Owner/Officer (no char		enewal		Ouplicate (Lost	t Card - \$18)	
Idaha Cada 40 1602(1); The Do	nortment may refuse (to ignue a ligando to an ar	valicant who has	over been ee	anvioted in	
Idaho Code 49-1602(1): The De a court of record in this state of	•	•				
(a) Have you ever had a Vehi subjected to other disciplir a firm whose license was If yes, please explain the o	nary actions or were yo revoked in Idaho or any	ou ever a partner, officer, d y other state.			Yes	No
Driver's License Number	Driver's License State	Social Security Nu	mber	Date of Birth		
Name as it Appears on Your Driver's License (Last, First, Middle) Please Print or Type				Daytime Phone Number		
Residence Address (Number and Stree	t - No PO Box)	City	I	State	Zip	
THE UNDERSIGNED hereby applies fildaho manufacturer's license act.	or a manufacturer's factory r	representative license in accorda	ance with the provis	sions of the		
I affirm under penalty of license forfeiturand belief. This form must be complete.			e and correct to the b	oest of my knowle	edge	
Applicant's Signature						
Manufacturer Name				Primary Manufacturer License Number		
Manufacturer Location						
O	4161 - 41 6 - = 4	D				
Sponsoring Manufacturer Cell hereby certify that a background an employee over 18 years of a	nd check has found the age. I understand that t	e applicant suitable for a fa this application is invalid u	ıntil submitted to	ITD and fees	are paid.	he is
Printed Name of Authorized Manufacturer Representative		Signature of Authorized Manufacturer Representative			Date	

^{*} All credit card transactions are subject to a 3% Access Idaho service fee.