

ion	Application Type - Select one box	Dealer Type - Select one box						
Section A	New Change Cancel			Motor Vehicle Boat Both Wholesa				Wholesale
	Sales Reporting Options - Select only one option							
Section B	All sales must b File sales using the Internet Notice of Sale Rep address, and the latest version of Internet Ex File sales by Hypertext Transfer or Protocol (HT vendor in the format prescribed by the Departm List software vendor and e-mail address:	uirements include a	ude access to the Internet, an e-mail clude a file created by your software					
Section C	Dealership Information	Contact Person Information						
	Name of Dealership	Contact Person's Name (Last, First, Middle)						
	Dealership's Address	Contact Person's Address						
	City	State	Zip Code	City		5	State	Zip Code
	Vehicle Dealer Number Boat Dealer Number	Contact	Person's E-Mail	Address		Telephone Number		
	Signature of Dealership Owner or Agent	Printed Name of Dealership Owner or Agent						

Form 5092 (Revised 03-2014)

Mail to: Motor Vehicle Bureau P.O. Box 43 Phone: (573) 526-3669

Visit http://dor.mo.gov/forms/Dealer Operating Manual.pdf for additional information.



Jefferson City, MO 65105-0043