(02/2015) By Authority of Public Act 300 of 1949 **FOR DEPARTMENTAL USE ONLY**

VEHICLE

 THRU

MICHIGAN DEPARTMENT OF STATE

Business Licensing Section

Lansing, MI 48918

MOTORCYCLE

 THRU

1-888-SOS-MIC H (1-888-767-6424)

FAX (517) 335-2810

**MULTI-YEAR APPLICATION FOR**

APPROVED: BY:

**ADDITIONAL DEALER PLATES**

**DEALER NAME** **(Exact Business Name – NOT DBA)**

**7 DIGIT DEALER NUMBER** **(Beginning with an LETTER)**

**ZIP**

**CITY**

**ADDRESS NUMBER AND STREET NAME (MAIN Location only)**

**REASON FOR REQUESTING ADDITIONAL PLATES:** **(You must provide a reason for requesting additional plates or your application will be delayed)**

**DEALER PLATE POLICY (Class A & B Dealers):**

The number of dealer plates which may be issued to a Class A or B dealership is determined by the following:

* One dealer plate for every 5 vehicles carried in highest (monthly) inventory up to and including 400 vehicles.
* Any inventory over 400 vehicles is calculated by 1 dealer plate for every 7 vehicles in excess of 400 vehicles carried in highest (monthly) inventory.

The Department of State may request proof of inventory from the dealership to determine the need for additional plates. Proof if inventory would include the following:

* Copies of police book entries, for vehicles in highest (monthly) inventory
* Front and back of Titles, for vehicles in highest (monthly) inventory

The Department of State may restrict the number of dealer plates issued.

**DEALER PLATE POLICY (Class W Dealers):**

The number of dealer plates which may be issued to Class W dealerships is determined by the following:

* One dealer plate for each 5 vehicles carried in highest (monthly) inventory, up to and including 40 vehicles.
* Any inventory over 40 vehicles is calculated by 1 dealer plate for each 10 vehicles in excess of 40 vehicles carried in highest (monthly) inventory.

In addition to the Application for Additional or Replacement Dealer Plates, Class W dealers must submit the following to verify the need for additional dealer plates:

* Copies of police book entries, for vehicles in highest (monthly) inventory
* Front and back of Titles, for vehicles in highest (monthly) inventory

The Department of State may restrict the number of dealer plates issued.

**ALL DEALERS are required to answer the following questions. Failure to do so will result in a delay of your request.**

1. How many vehicles do you **PRESENTLY** have in your inventory? NUMBER\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. How many vehicles have you carried in **highest MONTHLY inventory**

during the last 12 months? (**ONE month of highest inventory only**) NUMBER\_\_\_\_\_\_\_\_\_\_\_\_\_\_MONTH\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. How many vehicles have you carried in **lowest MONTHLY inventory**

during the last 12 months? **(ONE month of lowest inventory only)** NUMBER\_\_\_\_\_\_\_\_\_\_\_\_\_\_MONTH\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**ADDITIONAL DEALER PLATES: $10 each – \*Locate your dealer license to determine the YEAR your license expires.**

PLATE YEAR:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ NUMBER OF ADDITIONAL PLATES REQUESTED: VEHICLE:\_\_\_\_\_\_\_\_\_\_ MOTORCYCLE\_\_\_\_\_\_\_\_\_\_

PLATE YEAR:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ NUMBER OF ADDITIONAL PLATES REQUESTED: VEHICLE:\_\_\_\_\_\_\_\_\_\_ MOTORCYCLE\_\_\_\_\_\_\_\_\_\_

PLATE YEAR:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ NUMBER OF ADDITIONAL PLATES REQUESTED: VEHICLE:\_\_\_\_\_\_\_\_\_\_ MOTORCYCLE\_\_\_\_\_\_\_\_\_\_

PLATE YEAR:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ NUMBER OF ADDITIONAL PLATES REQUESTED: VEHICLE:\_\_\_\_\_\_\_\_\_\_ MOTORCYCLE\_\_\_\_\_\_\_\_\_\_

TOTAL Number of Plates Requested: \_\_\_\_\_\_\_\_\_\_\_\_\_ X Number of Years **(\*Locate your dealer license)** \_\_\_\_\_\_\_\_\_\_\_\_\_ X **$10 each plate** = **TOTAL AMOUNT DUE** $\_\_\_\_\_\_\_\_\_\_\_\_\_

**Mail to the address located above. Make check or money order payable to the “STATE OF MICHIGAN.”**

**An owner, partner or corporate officer (that is listed on the dealer license) must sign the application to request additional plates or the request will be delayed.**

**DATE**

**SIGNATURE AND TITLE OF OWNER, PARTNER OR CORPORATE OFFICER LISTED ON LICENSE**

**PRINTED NAME OF OWNER, PARTNER OR CORPORATE OFFICER**