



Dealer Temporary Sub-Agency License Application

Dealers use this form to apply for a temporary sub-agency license. There is a **\$100.00** fee per event. Send this completed form and a check or money order payable to the Washington State Treasurer, to:

Dealer/Manufacturer Services
Department of Licensing
PO Box 9039
Olympia, WA 98507
Telephone: (360) 664-6466

For validation only

Submit your application **no less than ten days** and no more than two months before the event. Any application submitted less than ten days prior to the event will be denied.

We cannot issue more than six temporary sub-agency licenses in any twelve month period.

TYPE or PRINT Dealer business name	
(Area code) Telephone number	(Area code) Fax number
Business street address	
City	ZIP code
Temporary sub-agency street address	
City	ZIP code
How many dealers are participating in the event? _____	
Dates of temporary sub-agency _____ through _____ (must not exceed 10 days)	
Issue a temporary sub-agency license under the following dealer number(s):	
Motor vehicle _____	Manufactured home/Travel trailer _____ Miscellaneous _____
Answer the following	
Does the location meet zoning requirements at the temporary sub-agency address listed above? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Have you submitted proof that the dealer bond covers the temporary sub-agency location? <input type="checkbox"/> Yes <input type="checkbox"/> No	
For recreational vehicles (RV) shows only:	
For new RVs offered for sale, have you enclosed a written approval from each manufacturer stating the brands offered, and the date and address of the event? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Is this event within 50 miles of your established place of business or within the factory designated sales territory for each brand offered for sale at the event? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Do you understand you may only offer used RVs for sale within 50 miles of your established place of business? <input type="checkbox"/> Yes <input type="checkbox"/> No	

I certify under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

X _____
Dealer representative signature Date

Title

X _____
Licensing compliance auditor signature

Date approved