



**MANUFACTURED HOME DEALER OR
 WATERCRAFT TRAILER DEALER
 CERTIFICATE OF REGISTRATION
 APPLICATION**

MVDB 54 (07/10/2015)

Purpose: Use this form to apply for a Certificate of Registration for a Manufactured Home Dealer OR Watercraft Trailer Dealer.

Instructions: Complete application and submit a copy of the valid Dealer's License with registration fee to the Motor Vehicle Dealer Board at the above address. MVDB will send the Certificate of Registration to the business mailing address provided below.

MVDB USE ONLY

REGISTRATION NUMBER	REGISTRATION FEE	OVERPAY	SHORTAGE	CLERK INITIALS
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BUSINESS INFORMATION

CHECK APPLICABLE BOX

- Manufactured Home Dealers** - Include a valid Dealer's License (copy) from the Department of Housing and Community Development with this application.
- Watercraft Trailer Dealers** - Include a valid Dealer's License (copy) from the Department of Game and Inland Fisheries with this application.

BUSINESS TYPE (check one)

- INITIAL APPLICATION RENEWAL APPLICATION CHANGE (explain):

DEALER INFORMATION

REGISTRATION NUMBER	FOR REGISTRATION ENDING (month/year)		
BUSINESS NAME	TRADING AS NAME		
BUSINESS LOCATION ADDRESS	CITY	STATE	ZIP CODE
BUSINESS MAILING ADDRESS	CITY	STATE	ZIP CODE
BUSINESS OWNER'S NAME (print) (last, first, middle, suffix)			
BUSINESS OWNER'S SSN	BUSINESS FEDERAL TAX ID		
BUSINESS OWNER'S RESIDENTIAL ADDRESS	CITY OR TOWN	STATE	ZIP CODE
BUSINESS OWNER'S PRIMARY CONTACT NUMBER	BUSINESS EMAIL ADDRESS		

PRIVACY STATEMENT

In accordance with Virginia Code §§ 2.2-803, 2.2-4807 and § 58.1-520 et seq., the State Comptroller requires that this information, including your social security number, be collected for debt set off collection purposes.

CERTIFICATION

I certify and affirm that all information presented in this form is true and correct, that any documents I have presented to MVDB are genuine, and that the information included in all supporting documentation is true and accurate. I make this certification and affirmation under penalty of perjury and I understand that knowingly making a false statement or representation on this form is a criminal violation.

OWNER/PARTNER/OFFICER OF BUSINESS NAME (print)

OWNER/PARTNER/OFFICER OF BUSINESS NAME (signature)

DATE (mm/dd/yyyy)