Wyoming Department of Transportation
Compliance & Investigation
5300 Bishop Boulevard
Cheyenne, WY 82009
Phone (307) 777-3815
Fax (307) 777-4229

DO NOT WRITE IN THIS SPACE

Permit Number: _____
Date Issued: _____
Event Date: _____

Document B

TEMPORARY RECREATIONAL VEHICLE DISPLAY & SALES PERMIT APPLICATION

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According to Wyoming Statute 31-16-127: Before displaying, demonstrating, exchanging, or selling a recreational vehicle, an out of state recreational vehicle dealer shall apply for a Temporary Recreational Vehicle Display & Sales Permit at least ninety (90) days prior to the recreational vehicle display and sales event. The recreational vehicle display & sales event must be held in conjunction with a state, regional, or national recreational vehicle rally with at least 150 pre-registered units. An out of state recreational vehicle dealer may not operate in more than three (3) events per calendar year and each recreational display & sales event shall not exceed seven (7) consecutive days. The Temporary Recreational Vehicle Display & Sales Permit Application shall be accompanied by a $500.00 permit fee, $50,000 surety bond, completed background check form(s), completed fingerprint card(s), fingerprint processing fee(s), and any other information required by the department. The permit to operate in a temporary recreational vehicle display & sales event shall be displayed in a location at the event where any peace officer or designated member of the department can examine it.

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_____ **First** _____ **Second** _____**Third: Temporary RV Display & Sales Event Permit Application for 20___**

********SECTION (A) - RECREATIONAL VEHICLE DEALER INFORMATION********

1.) _____
Legal Name of Recreational Vehicle Dealership

2.) _____
Trade Name of Recreational Vehicle Dealership

3.) _____
Mailing Address City Zip Code

4.) _____
Telephone Number Toll Free Number Fax Number

5.) _____
Dealership Contact for Event Title Telephone Number

6.)_____
State(s) Licensed as a Recreational Vehicle Dealer License #s (include copies) Expiration Date(s)

7.) _____
Make of Vehicles Sold / Franchises Held *(Include copies of franchise and sales & service agreements for each)*

8.) Federal Employer Identification Number (FEIN) _____
(Include IRS Documentation of this FEIN)

********SECTION (B) - TYPE OF OWNERSHIP********

1.) Please Check One: ____ Corporation* ____ Limited Liability Company* ____ Limited Partnership*

____ Joint Venture ____ General Partnership ____ Sole Proprietor

2.) *Incorporated under the laws of the State of: _____ Date of Incorporation: _____

********SECTION (B) - TYPE OF OWNERSHIP (Continued)********

3.) List all Owners, Partners, Members, or Corporate Officers of the Company or Business *(Attach additional pages if necessary)*: The information provided below is NOT subject to Public Record.

Name	SSN	Title	Home Address *(Not Business Address)*
Name	SSN	Title	Home Address *(Not Business Address)*
Name	SSN	Title	Home Address *(Not Business Address)*
Name	SSN	Title	Home Address *(Not Business Address)*

********SECTION (C) – EVENT INFORMATION********

1.) PLEASE LIST THE PHYSICAL ADDRESS OF THE TEMPORARY RECREATIONAL VEHICLE DISPLAY AND SALE EVENT

_____

_____

2.) _____
Trade Show Coordinator City/State Telephone Number

3.) PLEASE LIST THE DATES OF THE TEMPORARY RECREATIONAL VEHICLE DISPLAY AND SALES EVENT:

From_____ To_____

4.) INDICATE THE TYPE OF VEHICLES YOU WILL BE SELLING AT THE EVENT *(Manufacturer/Make)*

_____

_____

5.) NUMBER OF DEMONSTRATION (DEMO) PLATES REQUESTED FOR EVENT: _____
(Maximum of 2 Plates, $25.00 Each)

6.) NUMBER OF TEMPORARY REGISTRATION PERMITS REQUESTED FOR EVENT: _____
(Maximum of 10 Permits, $.50 Each)

As a new applicant, I declare that everything contained in this application is a true and accurate statement. I, as owner, officer of the corporation, or member of the LLC or LP, have the authority to sign this application and submit to the Criminal History Background Check Requirement as a condition of obtaining this permit.

_____
Signature of Applicant *(Owner/Corporate Officer Member of LLC or LP)* Title

_____
Printed Name of Applicant *(Owner/Corporate Officer/Member of LLC or LP)* Date