New Online Licensing System (eLICENSING) Coming Soon

This message contains information applicable to all motor vehicle licensees and salvage dealers regulated by Texas Department of Motor Vehicles (TxDMV). Please review and distribute as appropriate.

Coming soon, you will be able to apply for, renew, or amend licenses online. The Texas Department of Motor Vehicles (TxDMV) is replacing its current paper-based licensing system with eLICENSING, an online self-service hub for all motor vehicle and salvage licensees operating in Texas.

eLICENSING will provide many user benefits, including 24-hour access to licensing information, the elimination of paper processing, the ability to submit license applications and payments online, a guided application process facilitating faster approvals, and the ability to track the progress of submitted applications.

TxDMV will provide instructions and other support resources to help you access and use the system as the release date approaches. **Licensees must have an email address on file with TxDMV to receive important updates and use the new system.** Licensees can receive more information by emailing TxDMV at MVDLicensing@TxDMV.gov, calling 1-888-DMV-GOTX (368-4689), or visiting our website at www.TxDMV.gov/dealers.

Sincerely,

Daniel Avitia

Daniel Avitia, Director
Texas Department of Motor Vehicles
Motor Vehicle Division

(512) 465-3000
Toll-Free (888) 368-4689
Form available online at www.TxDMV.gov

Texas Department *of* Motor Vehicles

Motor Vehicle Lease Facilitator License Application

Application for a *License as a Lease Facilitator*:
Solicits persons to become the lessee of a vehicle (the vehicle is not, and will not be, titled or registered to the lease facilitator)

LEASE: A transfer of the right to possess and use a motor vehicle for a term of more than 180 days, in return for consideration.

Lease Facilitators must submit a separate application for each business location. A lease facilitator's licensed location must be physically located within the State of Texas.

Detailed instructions are available on our website at: http://www.TxDMV.gov

Application Contact: State the name of the person TxDMV may contact if there are any questions on this application:

Name:	Phone Number:	Email:

1. Business Name: _____
2. DBA/Assumed Name (as registered with the SOS or County): _____
3. EIN: _____
4. Physical Address: _____
   City: _____ State: _____ Zip: _____
5. Mailing Address: _____
   ☐ Same as physical
   City: _____ State: _____ Zip: _____
6. Business Phone Number: _____ Business Fax Number: _____
7. Business Email: _____ Business Website: (optional) _____
8. License Contact Name: _____ Phone: _____ Email: _____
   ☐ Same as business name ☐ Same as "Application Contact"
   ☐ Same as business phone ☐ Same as "Application Contact"
   ☐ Same as business email ☐ Same as "Application Contact"

9.	Is the applicant a Military Service member, Military Veteran, or Military Spouse?	☐ Yes ☐ No
10.	If you answered Yes to Question 9, does the applicant currently hold this type of license in another jurisdiction (state or country)?	☐ Yes ☐ No
11.	If you answered Yes to Question 9, did the applicant at some time in the last five years hold this type of license in Texas?	☐ Yes ☐ No

If you answered YES to Question 9, and also *either* Question 10 or 11, by Texas law you are eligible for expedited processing of this application. Please provide:

- documentation such as you or your spouse's active duty orders or DD-214 to confirm your status, and
- either:
  - your Texas License Number _____ , or
  - a copy of your current license from another jurisdiction.

If you answered YES to Questions 9 and 10, by Texas law your license fee is waived.Please provide:

- documentation such as you or your spouse's active duty orders or DD-214 to confirm your status, and
- a copy of your current license from another jurisdiction.

12. Fees: Lease Facilitator License: $750: _____ **FT**

See page 7 for payment & mailing instructions

(512) 465-3000
Toll-Free (888) 368-4689
Form available online at www.TxDMV.gov

BUSINESS NAME: _____

13. Current GDN (P Number) and Franchise License Number: (if applicable) _____

14.	Has TxDMV ever licensed the applicant to act in any capacity in Texas? "TxDMV" includes but is not limited to the TxDMV Board, the department, a division of the department, or a predecessor of any of these entities. "Applicant" includes the applicant's partner(s); any LLC member or manager; or any director, officer, or owner (except for stockholders of publicly-traded companies). If you answered "yes," then provide the licensed business name(s), license type(s), license number(s) issued, and the last effective date(s) for each license. <u>If you require extra space, please attach an additional page.</u> Name(s): _____ License #: _____ Type(s): _____ Date(s): _____	☐ Yes ☐ No
15.	Has the applicant previously applied for or received any license or other authorization that was denied, suspended, or revoked by a regulatory authority? "Applicant" includes the applicant's partner(s); any LLC member or manager; or any director, officer, or owner (except for stockholders of publicly-traded companies). "Authorization" includes, but is not limited to, any license, permit, registration, certification, credential, etc. issued by a regulatory authority. <u>If you answered "yes," then on a separate sheet, please provide the applicant or licensed business name(s), license number(s), and the last effective date(s) of the license(s), along with the reason the license(s) was/were denied, suspended, or revoked.</u>	☐ Yes ☐ No
16.	Has the applicant or any partner, any LLC member or manager, or any director, officer, owner (except for stockholders of publicly-traded companies) or any relative of the applicant ever applied for a license at the same proposed location that is the subject of this application?	☐ Yes ☐ No
17.	Has the applicant ever been found to have violated the Texas Occupations Code, Chapter 2301 (formerly Texas Motor Vehicle Commission Code) or Texas Transportation Code, Chapter 503? "Applicant" includes the applicant's partner(s); any LLC member or manager; or any director, officer, or owner (except for stockholders of publicly-traded companies). <u>If you answered "yes," then please explain fully on a separate sheet.</u>	☐ Yes ☐ No
18.	Does the applicant have an office area with desk, at least two chairs, internet access, and phone with a listed number?	☐ Yes ☐ No
19.	Does the applicant have a sign that is clearly visible to the public, permanently posted, with letters at least 6 inches high?	☐ Yes ☐ No
20.	Does the applicant have appropriate business hours posted that meet all TxDMV licensing requirements?	☐ Yes ☐ No
21.	Does the applicant have a current lease or ownership document for the property and agree to submit documentation, if requested by TxDMV, demonstrating the applicant owns or leases the property on which the business is situated that meets all TxDMV licensing requirements, including a term of two years? *(If leasing the property, the lease cannot expire before the license.)*	☐ Yes ☐ No
22.	Does the applicant's proposed place of business comply with all applicable state and local government occupancy laws, ordinances, and deed restrictions?	☐ Yes ☐ No
23.	Has the applicant obtained all mandatory certificate(s) of occupancy or similar authority to operate a business at the proposed location?	☐ Yes ☐ No
24.	Is the applicant's proposed place of business located within a residence, apartment house, hotel, motel, or rooming house?	☐ Yes ☐ No

BUSINESS NAME: _____

25. CERTIFICATION OF RESPONSIBILITY

- The applicant or an authorized agent hereby certifies that statements made above and on attachments and documents submitted are true, complete, and correct.
- Applicant acknowledges that the department may deny an application for a license or revoke or cancel a license if the applicant submits false or misleading information, makes a false statement, or refuses or fails to provide information requested by the department.
- Applicant further acknowledges that making a false statement in an application for a license may subject applicant to criminal prosecution. See Texas Occupations Code §2301.651, Texas Transportation Code §503.034 and §503.038, Texas Government Code §2005.052 and §2005.053, Texas Penal Code §37.10, and department rules.
- Applicant agrees to allow the Department to examine during working hours the ownership papers for each registered or unregistered vehicle in the applicant's possession or control.
- Applicant agrees to notify the TxDMV of a material change (including but not limited to a change in criminal history) within a reasonable time.
- Applicant swears they are not at this time delinquent in any court-ordered obligation to pay child support.
- Applicant has complied with all applicable state laws and municipal ordinances.

Date: _____

_____
Printed Name

_____
Authorized Signature

_____
Title

Privacy Statement

The Texas Department of Motor Vehicles maintains information collected through this form. With few exceptions, Texas Government Code Chapter 559 entitles you to: (a) request to be informed about this information, and (b) have TxDMV correct information about you that is incorrect. Chapter 552 of the Government Code entitles you to receive and review this information. You must submit requests for information in writing. Requests may be submitted via email to OGCOpenRecords@TxDMV.gov; by fax to (512) 465-4112; or by mail or in person to: TxDMV, OGC Open Records, 4000 Jackson Ave., Austin, TX 78731. For more information, please call TxDMV at (888) 368-4689.

26. ATTACHMENTS TO THE APPLICATION:

Please label each attachment with the corresponding letter. Detailed instructions for the attachments can be found in the Instruction Packet, LP024. Missing or incomplete attachments will delay application processing.

☐ A. OWNERSHIP INFORMATION – Use pages 5-6 of the application or a separate copy of Form LF601. You may duplicate page 6, as needed.

☐ B. ASSUMED NAME CERTIFICATES – All applicants intending to operate under an assumed name must attach a copy of the assumed name certificate. **Corporations, LLCs, LPs, and LLPs** must obtain these certificates from the Texas Secretary of State (SOS).
Only **Sole Proprietors & General Partnerships** may provide a certificate or file-stamped copy showing you are registered with your county in which the dealership will be located.

☐ C. CERTIFICATE OF INCORPORATION, ORGANIZATION, OR PARTNERSHIP:
Attach Certificate of Filing issued by the Texas Secretary of State for the formation of your business, showing that the entity has been approved. Please do not submit your filing documents.
Or
If your business was formed in another state, attach the Certificate of Authority issued by the Texas SOS showing that the entity has the right to conduct business in Texas.

☐ D. VEHICLE LEASE CONTRACTS – One copy of each vehicle lease contract the applicant uses. This is the lease contract in the lessor's name you will have the lessee sign. Need one for each lessor.

☐ E. LEASE FACILITATOR APPLICANTS - Attach the following:
- ☐ 1) A list including the business name(s), DBA(s), and address(es) of lessors with whom applicant conducts or intends to conduct business. (A lessor is a person who acquires title to a motor vehicle for the purpose of leasing the vehicle to another person).
- ☐ 2) A signed copy of the lease facilitator's agreement(s) with lessor(s) disclosing its terms. Need one for each lessor.
- ☐ 3) If applicable, a disclosure of fees statement, paid to the lease facilitator by a lessor. (This is a separate document the lessee signs acknowledging the Lease Facilitator receives a fee for establishing the lease.)

☐ F. FEES:
1) Mail or fax this form, with all fees and attachments, to the appropriate address listed on page 7.
2) A credit card payment form is included on page 8.
3) If paying by credit card, you may fax the entire package (including the credit card form) to (512) 465-4190. If you choose to fax the package, do NOT also mail the package.

Attachment A

Texas Department *of* Motor Vehicles

Ownership Information, Form LF601

This is important:

- Submitting an application containing false, misleading, or incomplete information may be grounds for denial or license cancelation, revocation, or suspension.
- A person who knowingly makes a false statement in connection with applying for or renewing a license may be subject to criminal prosecution.

If you are in doubt as to how to respond to these questions, full and honest disclosure is highly recommended.

1.	Has any person listed on this form, or any officer, director, partner, trustee, or other person acting in a representative capacity for the applicant or license holder, ever been arrested for an offense that is currently pending? (If yes, submit *Criminal History*, Form LF606.)	☐ Yes ☐ No
2.	Has any person listed on this form, or any officer, director, partner, trustee, or other person acting in a representative capacity for the applicant or license holder, ever: • been convicted of a felony or misdemeanor offense (other than minor traffic violations), or • received a deferred adjudication for a felony or misdemeanor offense, in any in-state, out of state, or federal jurisdiction? (If yes, submit *Criminal History*, Form LF606.)	☐ Yes ☐ No
3.	Has any person listed on this form, or any officer, director, partner, trustee, or other person acting in a representative capacity for the applicant or license holder, ever been convicted by a court martial or is currently the subject of a pending court martial under the Uniform Code of Military Justice? (If yes, submit *Criminal History*, Form LF606.)	☐ Yes ☐ No

TYPE OF BUSINESS (check only one box):

☐ Sole Proprietorship ☐ General Partnership ☐ Limited Partnership/LTD ☐ Other (Specify below)

☐ Limited Liability Company ☐ Corporation ☐ Limited Liability Partnership _____

Ownership Percentage Instructions

- List all individuals and business entities with any ownership interest in the business (this includes sole proprietors) until total ownership indicated equals 100%.
- Only direct ownership of the business entity (applicant) applying for the license should be provided. If direct ownership is held by another business entity, do not list that business entity's ownership.

Information Fields:

- Name of Owner:
  - SOLE PROPRIETOR: list the legal name and SSN of the owner (for example, John Doe, Jr.)
  - GENERAL PARTNERSHIP: list the legal name and SSN of each owner (for example, John Doe Jr., Jane Doe)
  - ALL OTHERS: list the full legal name of each person (and his/her SSN) or business entity that has ownership.
  - If the applicant is a publicly traded or nonprofit corporation, please mark the appropriate box and complete that section by providing one officer/director in lieu of ownership information.
- Title: Examples -- Owner, President, CEO, Partner, General Partner, Member, etc.
- Driver License:
  - Applies to individuals.
  - Attach a copy of the driver license for each individual listed.
  - If the driver license was issued in a foreign country, provide that information.

(512) 465-3000
Toll-Free (888) 368-4689
Form available online at www.TxDMV.gov

BUSINESS NAME: _____ Attachment A

Ownership Percentage

1.

Name of Owner (Person or Business) | Title | % of Ownership

Date of Birth | Driver's License # and State | Expiration Date | SSN (if person) OR EIN (if business)

If this is a business, is it nonprofit? ☐YES ☐NO

If this is a business, is it PUBLICLY TRADED? ☐YES ☐NO

2.

Name of Owner (Person or Business) | Title | % of Ownership

Date of Birth | Driver's License # and State | Expiration Date | SSN (if person) OR EIN (if business)

If this is a business, is it nonprofit? ☐YES ☐NO

If this is a business, is it PUBLICLY TRADED? ☐YES ☐NO

3.

Name of Owner (Person or Business) | Title | % of Ownership

Date of Birth | Driver's License # and State | Expiration Date | SSN (if person) OR EIN (if business)

If this is a business, is it nonprofit? ☐YES ☐NO

If this is a business, is it PUBLICLY TRADED? ☐YES ☐NO

4.

Name of Owner (Person or Business) | Title | % of Ownership

Date of Birth | Driver's License # and State | Expiration Date | SSN (if person) OR EIN (if business)

If this is a business, is it nonprofit? ☐YES ☐NO

If this is a business, is it PUBLICLY TRADED? ☐YES ☐NO

5.

Name of Owner (Person or Business) | Title | % of Ownership

Date of Birth | Driver's License # and State | Expiration Date | SSN (if person) OR EIN (if business)

If this is a business, is it nonprofit? ☐YES ☐NO

If this is a business, is it PUBLICLY TRADED? ☐YES ☐NO

6.

Name of Owner (Person or Business) | Title | % of Ownership

Date of Birth | Driver's License # and State | Expiration Date | SSN (if person) OR EIN (if business)

If this is a business, is it nonprofit? ☐YES ☐NO

If this is a business, is it PUBLICLY TRADED? ☐YES ☐NO

OWNERSHIP PERCENTAGE TOTALING 100% IS REQUIRED

All persons listed must provide SSN.

Privacy Statement

The Texas Department of Motor Vehicles maintains information collected through this form. With few exceptions, Texas Government Code Chapter 559 entitles you to: (a) request to be informed about this information, and (b) have TxDMV correct information about you that is incorrect. Chapter 552 of the Government Code entitles you to receive and review this information. You must submit requests for information in writing. Requests may be submitted via email to OGCOpenRecords@TxDMV.gov; by fax to (512) 465-4112; or by mail or in person to: TxDMV, OGC Open Records, 4000 Jackson Ave., Austin, TX 78731. For more information, please call TxDMV at (888) 368-4689.

BUSINESS NAME: _____

Payment and Mailing Instructions

Payment can be made by Credit Card, Personal Check, Money Order, Cashier Check, or Wire Transfer.

Payment and Mailing Information:		
Method of Payment	Instructions	Forward To:
Credit Card Amount must be between $5 and $2000 (A fee of $1.00 will be added to each Credit Card Transaction)	Complete the "Payment By Credit Card" form included on the next page. Mail form and documents or fax form and documents	Texas Department of Motor Vehicles Motor Vehicle Division P. O. Box 26487 Austin, TX 78755 Fax: (512) 465-4190
Check or Money Order (A fee of $30 will be charged for returned checks)	Pay to: Texas Department of Motor Vehicles Mail check/money order and documents	Texas Department of Motor Vehicles Motor Vehicle Division P. O. Box 13044 Austin, TX 78711-3044
Wire Transfer	Call or email to let us know to expect the wire. Fax or email your documents the same day you send the transfer. Call: (512) 465-4029 Fax: (512) 465-4190 Email: MVD_Licensing_Inquiries@TxDMV.gov	Financial Institution: Comptroller, Austin, TX Routing Number: 114900164 Account Name: Comptroller of Public Accounts, Treasury Operations Account No. to Credit: 463600001 Reference: (i.e. - Remitter's name) Attention: 608-Texas Department of Motor Vehicles, Motor Vehicle Division Keith Parker or Sergio Rey

Documents Only - No Payment Being Forwarded		
Item being submitted	Instructions	Forward To:
Documents for the Motor Vehicle Division	Mail or fax documents	Texas Department of Motor Vehicles Motor Vehicle Division P. O. Box 26487 Austin, TX 78755 Fax: (512) 465-4190
Request for an Open Record or Subpoena	Fax signed request	Administration (512) 465-4135 Lemon Law (512) 465-5653

Overnight mail to a post office box can only be delivered by the United States Postal Service.

BUSINESS NAME: _____

Payment by Credit Card, Form 2293

This form is for credit card payment information only.
This form does not constitute a request for services.

TO: MOTOR VEHICLE DIVISION	*Check appropriate box:*
ATTENTION: _____	☐ Civil Penalty ☐ Open Records
DATE: _____	☐ Lemon Law Fee ☐ Protest fee
MVD FAX #: (512) 465-4190	☐ Licensing Fee ☐ Subpoena
	☐ Insufficient Funds Fee

Comment: _____

Applicant Name: _____

Assumed Name: _____

Name on Credit Card: _____

Billing Street,
City, State, Zip: _____

Phone: _____

Fax: _____

Docket No. (if applicable) _____

License No. (if applicable) _____

Invoice Number: _____

MVD USE ONLY
ENTRY RECORD

Date _____

AC# _____

Amount _____

Agent _____

Credit Card Information:

Credit Card Type ☐ Visa ☐ MasterCard ☐ Discover ☐ American Express

Credit Card Number ☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐☐

Expiration Date (month/year) ☐☐ / ☐☐

$ _____ _____
Amount Approved (Add $1 Fee) Signature

AMOUNT MUST BE BETWEEN $5 and $2000

(512) 465-3000
Toll-Free (888) 368-4689
Form available online at www.TxDMV.gov