RECREATIONAL VEHICLE DEALER TWO YEAR LICENSE APPLICATION

MV2187 10/2026 Ch. 218 Wis. Stats.

Wisconsin Department of Transportation
Dealer and Agent Section
PO Box 7909, Madison, WI 53707-7909

Application Type *(check all that apply)*
☐ New Recreational Vehicle Dealer License Application
☐ Buyout of Existing Recreation Vehicle Dealer

Amending Current License
☐ Relocation
☐ Ownership Change
☐ Legal Name Change
☐ Other (explain in detail on a separate document)

Legal Business Name or Sole Proprietor Name *(Not Trade Name or DBA)*	FEIN	Dealer License Number

Trade Name or DBA	Sales Tax Seller Permit Number	(Area Code) Telephone Number

Business Address PO Box City State ZIP Code

Business Email Address *(All credentials will be sent here)*	County *(Business Location)*	☐ City ☐ Village ☐ Township Name:

Business Entity Type
☐ Sole Proprietorship ☐ LLC ☐ Corporation ☐ Partnership ☐ Association

Will your dealership be selling new recreational vehicle trailers? ☐ Yes *(MV2137 form is required)* ☐ No

Will your dealership be selling motor homes? ☐ Yes *(MV2186 form is required)* ☐ No

Add Branch Location *(Note: A branch location is a secondary location within the same municipality.)*
Address:

Add Sublot Location *(Note: A sublot is a secondary location in the same municipality which lacks indoor display and service facilities. New vehicles may not be sold from a sublot.)*
Address:

Completely describe other business, if any, engaged in by your firm

Same Location? ☐ Yes ☐ No

Are additional dealerships owned?
☐ Yes, license number ☐ No

Was there a licensed dealer at this same location previously this year?
☐ Yes, Dealer Name ☐ No

Do you own and operate your own service department?
☐ Yes ☐ No (*MV2535 form is required*)

Have you or your above-named firm ever been licensed as a dealer?
☐ Yes ☐ No
If yes, license number:
Was it at the same location? ☐ Yes ☐ No

Is real estate/property owned by the business?
☐ Yes ☐ No (Two-year lease agreement is required)

Has your recreational vehicle dealer license ever been denied, suspended or revoked?
☐ Yes ☐ No
If yes, license number:
When and what state:

Are you licensed as a motor vehicle salvage dealer at the same location?
☐ Yes, license number ☐ No

Will you be named as the lessor on any vehicle title? ☐ Yes ☐ No
If yes, MV2509 Lessor Bond is required in the amount of $60,000, per Wis. Stat. §344.51.

APPLICATION FEES

Dealer License (Required)……...$ 100
Branch License (Optional $100/branch)……..……..$_____
Representative License (Min.1 representative) # _____ x $8…....$_____
Dealer License Plates (Required 2 plates)…….....…..$ 150
License Plate Issuance Fee (One time fee for new applicant)……$ 12
Number of Additional Plates (Optional) # _____ x $10……...$_____
Replacement License Plates……..# _____ x $4.....$_____
List letters of All Missing Plates: _____

TOTAL (Check Payable to Registration Fee Trust)……..$_____

Apply by Mail (*Mail all signed application forms and DOT payment*)
Wisconsin Department of Transportation
PO Box 7909
Madison, WI 53707-7909

Apply by Email (instructions can be found at the link below)
Wisconsin DMV Official Government Site - Motor vehicle business licenses

Check Only ONE Box (applicable to your dealership)
☐ 1. During the next two years our dealership will sell ALL vehicles on a *Cash Only* basis.
☐ 2. Our dealership originates retail installment sales contracts and/or consumer leases:
- a. All of the contracts of leases we originate are sold or transferred to a third party.
- b. Some or all of the contracts or leases are retained by our dealership.

I, undersigned, certify under penalty of S.345.17 Wisconsin Statutes that (1) a lease agreement covering at least the licensing year has been executed if premise is not owned by applicant, and (2) the answers and statements on this application are true and correct to the best of my knowledge.

_____
(Position Title)

_____ _____
(Signature / Title of Authorized Dealership Agent) (Date mm/dd/yyyy)

Recreational Vehicle dealer licensing law requires all recreational vehicle dealers to pay a fee to the Department of Financial Institutions. Please complete DFI form LFS181 and submit to DFI at the address provided on the form.

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Local municipality approval is required if you are a first-time dealer applicant or if you are a licensed dealer amending current license due to business relocation, ownership change, or other amendment.

- Section A must be completed and signed by the proper zoning official
  - Both Box 1 and Box 2.
- If the dealership is located in a township, both sections A and B must be completed and signed by respective zoning authorities.

ATTENTION ZONING AUTHORITIES: A recreational motor vehicle dealer is required to have:

1. A permanent building. (Which may be a residence if it is accessible to an outside entrance and is used primarily for conducting the recreational vehicle business)
2. An office within the building.
3. A repair shop on the premises OR a service agreement with a nearby repair shop. (Not required for sublots.)
4. Provide an outdoor recreational vehicle display lot adjacent to the business office OR all vehicles are displayed indoors. (Not required for sublots.)
5. The building and premises comply with all local zoning, building code and permit requirements.
6. An exterior business sign with business name as it will appear on the license certificate or any other official name used to do business under. The lettering of the sign must be a minimum of 4 inches high, unless smaller dimensions are required by local zoning or sign ordinance.
7. A sign posted on or adjacent to the entrance door describing business hours.

SECTION A

Dealer Legal Business Name (not DBA name)

Business Address | PO Box | City | State | ZIP Code

Box 1: Operation of this dealer business at the location stated above is in accordance with local zoning, building code and permit requirements.

Print Name	Municipality

X _____ (Authorized Signature) | _____ (Print Official Title) | _____ (Date –mm/dd/yyyy)

Box 2: Check only one and sign below: ☐ **A local permit or license is required and has been issued**
☐ **A local permit or license is not required.**

Print Name	Municipality

X _____ (Authorized Signature) | _____ (Print Official Title) | _____ (Date –mm/dd/yyyy)

SECTION B (*County Zoning Approval – Required only if business location is in a township)*

Dealer Legal Business Name (not DBA name)

Business Address | PO Box | City | State | ZIP Code

Operation of this dealer business at the location stated above is in accordance with local zoning regulation.

Print Name	Municipality

X _____ (Authorized Signature) | _____ (Print Official Title) | _____ (Date –mm/dd/yyyy)

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