



MINNESOTA DEPARTMENT OF PUBLIC SAFETY
DRIVER AND VEHICLE SERVICES

445 Minnesota Street, Suite 186, St. Paul, MN 55101-5186
Phone: (651) 201-7800 Fax: (651) 297-1480
Web: dvs.dps.mn.gov Email: DVS.DealerQuestion@state.mn.us

OFFICE USE ONLY	
DEALER NUMBER:	_____
DATE RECEIVED:	_____
COUNTY:	_____
AREA:	_____
INITIALS:	_____

Franchise Agreement

- New vehicle dealers must file this agreement for each new make of vehicle they sell.
- If a new vehicle dealer fails to file an agreement for each new make of vehicle they sell, they are subject to Minnesota sales tax.

SECTION A – Dealer Information

Dealer Name _____ Dealer Number: _____

Street _____

City _____ State _____ Zip Code _____ County _____

SECTION B – Manufacturer/Distributor Information

Name of Manufacturing Company: _____

Make of Vehicle: _____

Name of Authorized Representative: _____

Authorized Representative's Position: _____

SECTION C – AGREEMENT

I, as an authorized representative of the above described manufacturer, state that the dealer in **SECTION A** of this form has an agreement with the manufacturer/distributor listed in **SECTION B**, for the sale of new motor vehicles of our manufacture.

This is a written agreement with _____ as _____
DEALERSHIP OWNER, OFFICER, OR PARTNER POSITION

and will begin on _____ and go through _____ Continuous/No end date

unless sooner terminated and notice of such termination is filed with the Minnesota Department of Public Safety Driver and Vehicle Services division.

X _____
SIGNATURE OF MANUFACTURER'S AUTHORIZED REPRESENTATIVE DATE

Signed and sworn before me by _____
This _____ day of _____
_____ (Notary Public)
My commission expires _____