

REGISTRATION FOR MOTOR VEHICLE RELATED FINANCE COMPANY



SUSAN COMBS • TEXAS COMPTROLLER OF PUBLIC ACCOUNTS

GENERAL INFORMATION

SUBMIT THIS REGISTRATION IF -

- you are a sole owner, partnership, corporation or other organization and at least 80% of your ownership is identical to the ownership of a dealer as defined in Section 503.001, Transportation Code.

FOR ASSISTANCE -

If you have any questions about this registration, contact the Texas Comptroller's Office at (800) 252-1382 toll free nationwide. The Austin number is (512) 463-4600.

GENERAL INSTRUCTIONS -

- Registration is effective for one year and must be renewed annually.
- Write only in white areas.
- Do not use dashes when entering Social Security, Federal Employer's Identification (FEI), Texas Taxpayer or Texas Vendor Identification Numbers.
- Mail completed registration and payment to: STATE COMPTROLLER
111 E. 17th Street
Austin, TX 78774-0100

You have certain rights under Chapters 552 and 559, Government Code, to review, request, and correct information we have on file about you. Contact us at the address or toll-free number listed on this form.

REGISTRATION FEE

\$600.00 per year (Make check payable to STATE COMPTROLLER.)

SPECIFIC INFORMATION

- Item 1 - SOLE OWNER** - Enter first name, middle initial and last name.
PARTNERSHIP - Enter the legal name of the partnership.
CORPORATION - Enter the legal name exactly as it is registered with the Texas Secretary of State.
OTHER ORGANIZATION - Enter the title of the organization.
- Item 2** - Enter the complete mailing address where you want to receive mail from the Comptroller of Public Accounts.
- Item 4** - Enter the Federal Employer's Identification (FEI) Number assigned to your business by the United States Internal Revenue Service.
- Item 5** - If you have both a Texas Taxpayer Number and a Texas Vendor Identification Number, enter only the first eleven digits of the Vendor Identification Number.

b. ■

REGISTRATION FOR RELATED FINANCE COMPANY

a. T code ■ 9 9 1 0 0	c. TP ■ _____	d. Amt ■ 600.00	e. Suspense ■ 0 1 4	f. PM ■ _____	g. FP ■ _____
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• TYPE OR PRINT

• DO NOT WRITE IN SHADED AREAS

IDENTIFICATION	1. Legal name of owner (Sole owner, partnership, corporation or other name) ■ _____
	2. Mailing address (Street & number, P.O. Box or rural route and box number) _____ City _____ State _____ ZIP code _____ County _____ Area code and number _____
	3. Enter the daytime phone number of the person completing this registration. _____
	4. Enter your Federal Employer's Identification (FEI) Number, if any. _____ 3 _____
	5. Enter your taxpayer number for reporting any Texas tax OR your Texas Vendor Identification Number if you now have or have ever had one. ■ _____

OWNERSHIP	6. If the business is a Texas corporation or limited liability company, enter the file number issued by the Texas Secretary of State and date of filing (if applicable). File/Charter number _____ Month _____ Day _____ Year _____
	7. If the business is a non-Texas corporation or limited liability company, enter the state/country of incorporation, file number and date. If applicable, enter the Texas Certificate of Authority number issued by the Texas Secretary of State and date. State/country of inc. _____ File number _____ Month _____ Day _____ Year _____ Texas Certificate of Authority number _____ Month _____ Day _____ Year _____
	8. If the business is a limited partnership or registered limited liability partnership, enter the home state and registered identification number. (Attach a copy of registration documentation.) State _____ Number _____

SELLER FINANCE DEALERS	9. Identify all motor vehicle seller finance dealers in which at least 80% of the ownership is identical to you and from whom you intend to purchase accounts. Enter name and 11-digit Texas taxpayer number as it appears on their seller finance sales tax permit. (Attach additional sheets, if necessary.)
	Name _____ Percentage of identical ownership _____ % Texas taxpayer number _____
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	Name _____ Percentage of identical ownership _____ % Texas taxpayer number _____

10. I declare that the information in this document and any attachments is true and correct to the best of my knowledge and belief.

Type or print name	Title
sign here ▶	Date

Include **\$600.00** with this registration, payable to STATE COMPTROLLER.
The registration is effective the first day of the month in which full registration fee is paid and the properly completed registration form is submitted.