



DMV USE ONLY

DATE: _____	LICENSE NO.: _____	EXP. DATE: _____	<input type="checkbox"/> NEW	<input type="checkbox"/> RENEWAL
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INSTRUCTIONS:

1. Please print clearly.
2. The following documentation must also accompany this application: Business License Personnel List (K-26), Agent for Service Form - CT, Copy of Incorporation papers.
3. Enclose a check made payable to "DMV" for \$500.00.

NAME OF CLUB OR ASSOCIATION

LOCATION - NUMBER AND STREET SUITE

CITY OR TOWN STATE ZIP CODE AREA CODE PHONE NUMBER

MAILING ADDRESS (If different)

PRINCIPAL OFFICER OR MANAGING MEMBER

Address (Number and Street) (City or Town) (State) (Zip Code)

ADDITIONAL OWNERS, OFFICERS, MEMBERS OF AUTO CLUB (Please use additional sheet, if needed)

Address (Number and Street) (City or Town) (State) (Zip Code)

ADDITIONAL OWNERS, OFFICERS, MEMBERS OF AUTO CLUB (Please use additional sheet, if needed)

Address (Number and Street) (City or Town) (State) (Zip Code)

STATE WHERE INCORPORATED (Copy of Incorporation Paper must accompany this application)

SIGNATURE (Officer Authorized to Sign Legal Document(s) on Behalf of Auto Motor Club) DATE

X

DATE

X

WITNESS:

APPROVED

DISAPPROVED