GEORGIA DEPARTMENT OF REVENUE DEALER REGISTRATION

Directly Financed Dealer Sales

General Instructions

- Except for the initial application, submit this application every year with your Annual Dealer Master Tag application.
- Qualifications
 - o Used Motor Vehicle dealers who directly finance at least 90% of the motor vehicles sold should complete this form and return it to the address listed below.
 - O Qualifying applicants are entitled to sell directly financed used motor vehicles at a reduced rate of state and local Title Ad Valorem Tax (TAVT). The reduced rate is equal to 2.5% less than the ordinary rate in effect on the date of purchase.
 - Only those vehicles financed by the selling dealer or a Related Finance Company (RFC) may qualify for the reduced rate.
 - o If financing is provided by a Related Finance Company, common ownership of 90% must exist between the selling dealer and the Related Finance Company.
 - o Only those sales financed pursuant to an installment note providing for a 24 month term or longer qualify for the reduced rate.
 - o Qualifying dealers must retain (i.e., cannot assign) at least 90% of all such installment notes.
 - o All liens and/or security interests must be recorded electronically and the ELT Customer Number must be shown on the title application in the appropriate field.
 - o The "Directly Financed" block must be checked on the title application at the time of submission.
- Attach a copy of all dealer licenses which may apply to this application.
- Attach a copy of the dealer registration issued by the Georgia Department of Revenue.
- The registration fee is \$100.00. Please make your check or money order payable to the Georgia Department of Revenue.
- The completed and signed application, should be mailed to:

Georgia Department of Revenue Motor Vehicle Division – Attn: Special Tags PO Box 740381 Atlanta Georgia 30374-0381 Form MV-DF1 (Rev 12-2013)

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A. Established Place of Business List the dealership through which you will sell directly financed motor vehicles. Please provide the Trade name, Person to contact/Job Title, Physical address/established place of business, Permanent ID number, Phone number for location, percentage of directly financed sales. Trade name: _____ Dealer's Permanent ID number: Person to Contact:____ City: _____ State: ____ ZIP: ____ Phone Number for Location: Percentage of Directly Financed Sales: **B.** Identification 1. Name and Job Title of Person Submitting this application: 2. Mailing Address: City: _____ State: ____ ZIP Code: ____ 3. Daytime phone number of the person completing the registration: 4. Email Address: ______ 5. Enter Federal Employer Identification (FEI), if any: _____ 6. Enter Georgia State Taxpayer Identifier (STI) number: _____

Form MV-DF1 (Rev 12-2013)

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C. <u>Directly Financed Dealer or Related Finance Companies (RFC)</u>:

Identify the Direct Finance Dealer or any Related Finance Company which will be shown as the lien or security interest holder on the title application. There must be at least a 90% common ownership to the applicant. (Attach additional sheets, if necessary).

Dealership Trade Name or RFC	% Common Ownership	ELT Customer Number (Required)
1		
2	- <u></u> -	
3		
4		
5		
D. Affirmation		
"I, as Owner, Pa	artner or Authorized Officer o	f the above named entity hereby affirm
under penalty of law, that I have examined and v including any supplemental form(s) and/or docur untrue statement(s) nor are they missing any mat this certification is to be submitted annually at a Signature	ment(s) and that these docume erial information and/or facts. time determined by the Depar	ent(s) and or statement(s) do not contain any I also acknowledge and understand that tment of Revenue."
STATE OF GEORGIA COUNTY OF		
Sworn to (or affirmed) and subscribed before me by	this day of	, 20
Notary Signature	(NOTARY	STAMP OR SEAL)
(Office Use Only)		
Date Received:/	Initials of Person Assigned to	Application
	3	