



LOUISIANA MANUFACTURED HOUSING COMMISSION

LOUISIANA MANUFACTURED HOUSING SALESMAN'S LICENSE APPLICATION

1. All questions must be answered or application will be returned.
2. Fees: \$50.00 per Salesman \$5.00 Transfer
*\$26.00 Background Check must be a **company check or money** order made out to **La. Department of Public Safety**
**\$50.00 Late Fee if not renewed on time

* Background Check: All **new applicants** must pay \$26.00 for an initial background check to La. Department of Public Safety company check or money order only
** Delinquent Fee: **Renewal applications** will be charged a \$50 delinquent fee if not postmarked submitted online by December 31st.
3. A photocopy of your driver's license must be attached.
4. A licensed salesman transferring employment from one retailer to another shall apply to this office for transfer of license 15 days after the date of transfer.
5. A check or a money order must accompany application made payable to:
LOUISIANA MANUFACTURED HOUSING COMMISSION
6. All salesmen's license will be mailed to the retailers' address.

GENERAL REQUIREMENTS

Any individual, director, officer or agent of a corporation who knowingly and willingly violates any provision of the code or of Louisiana R.S. 51:911 pertaining to manufactured homes in a manner which threatens the health and safety of any purchaser shall be fined not more than \$1,000.00 or imprisoned not more than 1 year or both.

LOUISIANA MANUFACTURED HOME SALESMAN'S LICENSE APPLICATION

SALESPERSON NAME: _____

MAILING ADDRESS: _____ City/State/Zip: _____

SSN: _____ DATE OF BIRTH: _____ RACE: _____ SEX: _____ DRIVER'S LIC#: _____

HOME PHONE: _____ WORK PHONE: _____

SALESPERSON E-MAIL ADDRESS: _____

PHOTOCOPY OF YOUR DRIVER'S LICENSE MUST BE ATTACHED

RETAILER INFORMATION: RETAILER FOR WHOM SALESMAN IS CURRENTLY EMPLOYED

RETAILER NAME (DBA): _____ RETAILER'S #: _____

MAILING ADDRESS: _____ CITY/STATE/ZIP: _____

PHYSICAL ADDRESS: _____ CITY/STATE/ZIP: _____

RETAILER E-MAIL ADDRESS: _____

DATE FIRST EMPLOYED AS AN ACTIVE, LICENSED, MFG HOUSING SALESMAN? _____

PROVIDE THE FOLLOWING INFORMATION:

RETAILER NAME(DBA): _____ RETAILER'S #: _____

ADDRESS: _____ CITY/STATE/ZIP: _____

*HAS APPLICANT EVER BEEN CONVICTED OF ANY FELONY OR ARE ANY CHARGES PENDING?
() YES () NO IF YES, PROVIDE DETAILS ON SEPARATE SHEET.*

*BY SIGNATURE BELOW I HEREBY AUTHORIZE CRIMINAL BACKGROUND CHECKS TO BE CONDUCTED
BY THE LOUISIANA MANUFACTURED HOUSING COMMISSION. PLEASE BE ADVISED THAT THIS
BACKGROUND CHECK MAY BE SHARED WITH A PROSPECTIVE EMPLOYER.*

THESE FACTS ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE:

SIGNATURE OF APPLICANT _____ DATE _____

SUBSCRIBED AND SWORN BEFORE ME THIS _____ DAY _____ 20____

SIGNATURE OF NOTARY _____

LOUISIANA MANUFACTURED HOUSING COMMISSION USE ONLY

DATE RECEIVED: _____ AMOUNT OF CHECK \$ _____ CK# _____

BACKGROUND CHECK: _____ DATE: _____ APPROVED BY: _____ DATE: _____