

Texas Department of Housing and Community Affairs

MANUFACTURED HOUSING DIVISION

P. O. BOX 12489 Austin, Texas 78711-2489
 (877) 313-3023, (512) 475-2200 FAX (512) 475-3506
 Internet Address: www.tdhca.state.tx.us/mh/index.htm

APPLICATION FOR RETAILER WITH BRANCH LOCATIONS LICENSE
(Please type or print clearly.)

Check one: Corporation Partnership Sole Proprietorship Other

1. Business Name: _____
 DBA Name: _____

2. Business Owner's Name: _____

3. Have you ever been licensed by TDHCA? YES / NO If so, please provide license number: _____

4. Location Address:	City	State	Zip	County	Phone/Fax

5. Mailing Address:	

6. Email Address:	Website Address:

7. Provide list of all other business or trade names, or other business organizations that are subject to regulation by the Department, in which you are a principal or have ownership interest in.

Business or Trade Name(s)	Physical Address, City, State, and ZIP

8. Date applicant became owner, operator (or date incorporated): _____

9. Provide complete information on ALL owners, principals, partners and/or corporate officers (additional may be listed on a separate sheet). The social security number is now required.

Name and Title	Home Mailing Address	Home Phone	Date of Birth	SSN

<p>10. A CRIMINAL BACKGROUND CHECK WILL BE RUN. Have you, a corporate officer, or a partner, ever acquired a criminal record, which may consist of conviction, deferred adjudication, plead guilty, or nolo contendere, for any felony or misdemeanor offense, other than a Class C Misdemeanor for traffic violations, within the five years preceding this application?</p>	<p><input type="checkbox"/> NO <input type="checkbox"/> YES If YES, complete the required Criminal Record Affidavit ensuring that you provide accurate and thorough details sufficient to persuade the Department that your conviction does not pose a threat to the consumer or the industry.</p> <p>If a criminal record is identified within the last five years and the applicant checked "no" the license may be denied.</p>
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11. Indicate which type of license you are applying for:
 Register a primary location with branch locations specified on an attached sheet (attach bond for each location)
 Register an additional branch location to an existing Retailers Branch

12. What function(s) will you be performing: Transporting Installation

13. Name of related person who attended licensing education class: _____

<p>14. Are you in arrears on any taxes owed to the State of Texas?</p>	<p><input type="checkbox"/> NO <input type="checkbox"/> YES If you answered YES, provide proof that you are in good standing or that you have made payment arrangements.</p>
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<p>15. Are you in arrears on a guaranteed student loan?</p>	<p><input type="checkbox"/> NO <input type="checkbox"/> YES If you answered YES, provide proof that you are in good standing or that you have made payment arrangements.</p>
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<p>16. Are you in arrears of any child support required by the Family Code?</p>	<p><input type="checkbox"/> NO <input type="checkbox"/> YES If you answered YES, provide proof that you are in good standing or that you have made payment arrangements.</p>
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Certification

License is subject to revocation, if the Department is **NOT** notified in writing of any changes in the information given on this application or if there is a violation of the law.

With knowledge of penalties for false statements, I certify that to the best of my knowledge all information submitted on this application and on all attached documents is true and correct.

(Signature of Applicant or President, if incorporated)

(Date)

(Signature of Secretary, if incorporated)

(Date)

Department Use Only

Education:

(Courses held in Austin, Texas)

- 8 hour Core Education Course
- 4 hour Retailer Education Course
- 4 hour Installer Education Course

Fees:

- Education Fee
- \$550.00 Retailer Licensing Fee
- \$900.00 Retailer/Broker Licensing Fee
- \$900.00 Ret./Installer Licensing Fee
- \$1250.00 Ret./Brok/Inst. Licensing Fee

Additional Requirements:

- \$50,000 BOND/CD