



**OKLAHOMA USED MOTOR VEHICLE, DISMANTLER, AND
MANUFACTURED HOUSING COMMISSION**

421 NW 13th Street, Suite 330, Oklahoma City, OK 73103

Phone: (405)521-3600 Fax: (405)521-3604

Email: commission@oumvdmhc.ok.gov

**ONLINE APPLICATION FOR MANUFACTURED HOME INSTALLER'S
IDENTIFICATION CARD**

REGISTRATION REQUIREMENTS

- Proof of attendance of Oklahoma State Qualified Education Program
- OSBI report including all three searches (name based, violent offender, sex offender). You may order the background check from OSBI on their website: <https://chirp.osbi.ok.gov/> .
- Copy of current Oklahoma driver's license.

FULL NAME		CONTACT PHONE		
DATE OF BIRTH	SOCIAL SECURITY NUMBER		DRIVER'S LICENSE NUMBER	
HOME ADDRESS		CITY	STATE	ZIP
1. Are you a U.S. Citizen? If no, attach a copy of your USCIS Immigration documents verifying the qualified alien status.				<input type="checkbox"/> Yes <input type="checkbox"/> No
2. Have you ever been convicted of or pled guilty or "no contest" to a felony? Felony applicants must submit copies of the Judgement and Sentencing documents for all convictions and are required to make a personal appearance before the Board of Commissioners. All documentation must be in our office BEFORE your appearance will be scheduled. <u>Felony applicants require review and approval by the Commission en banc before acting as a salesperson.</u>				<input type="checkbox"/> Yes <input type="checkbox"/> No

APPLICANT CERTIFICATION

I certify under penalty of perjury that the answers and information contained herein are true and correct. I hereby authorize the Oklahoma Used Motor Vehicle, Dismantler, and Manufactured Housing Commission to make any background investigation necessary prior to the issuance of my manufactured home installer's identification card. **Failure to provide information or material misrepresentation is grounds for \$1,000 fine and denial or subsequent revocation of the manufactured home installer's identification card.**

DATE	APPLICANT SIGNATURE:
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EMPLOYER'S ENDORSEMENT

The foregoing answers by the above applicant have been read by me and are believed to be true to the best of my knowledge and belief. The applicant is recommended as trustworthy and a person who will abide by the provisions of the laws and the rules and regulations governing the instillation of manufactured homes. I certify that the above-named person is an employee of the business and not an independent contractor and will not be operating their own business under my license. I understand that this activity could result in the revocation of my license.

DATE	EMPLOYER SIGNATURE	TITLE
LICENSE NUMBER UD-	BUSINESS NAME	