



NORTH CAROLINA DIVISION OF MOTOR VEHICLES

LICENSE AND THEFT DEALER AND/OR SALESMAN LICENSE DENIAL HEARING REQUEST FORM

I, _____, request a hearing for one of the hearings below.

Please check the hearing you are requesting.

- Dealer License Denial
Salesman License Denial

In submitting this request, I understand that the entire hearing fee of \$200 must accompany this form for a hearing to be scheduled. A separate hearing fee must be paid for each type of hearing. Please see Admin Code 19A NCAC 03K .0101 for further information.

Please legibly write all the information below to assure proper processing of your hearing request.

Form with fields for Dealer Name, Dealer License Number, Dealer Address, Mailing Address, Dealer Phone Number, Dealer Fax Number, Requestor Email Address, Salesman Name, Salesman License Number, Salesman Address, Salesman Phone Number, and Name, Address, and Phone Number of Attorney (if applicable).

Signature: _____ Date _____

All Requests and Payments should be mailed to: Division of Motor Vehicles, Attn: Administrative Support Unit – L&T Hearings, 3127 Mail Service Center, Raleigh, NC 27697-3127. For questions call 919-861-3509.

*Hearing requests cannot be submitted to DMV Inspectors or at local DMV offices.
*Note: Hearing requests are not valid unless accompanied by \$200 paid by check, money order. A hearing will not be scheduled unless \$200 is sent with this form.
*You may cancel your hearing at any time. Please review the cancellation request form for terms and conditions of partial refunds.