

## Michigan Department of State - Dealer Selection for Designated Branch Offices

**(Please complete all sections of this form)**

<b>Business Name</b>		<b>Dealer License No.</b>
<b>Business Street Address</b>		<b>City</b>
<b>Business Email Address</b>		<b>Date</b>
<b>Owner/Officer's Signature</b>  <b>X</b>	<b>Owner/Officer's Printed Name</b>	<b>Title</b>

List below up to a maximum 3 branch offices where you will submit dealer transactions.  
Enter the branch designated to purchase BFS-4 15-day temporary registrations as your first choice.

<b>1st Branch</b>  <b>BFS-4 Temporary Registration Purchases</b>	<b>Branch Number</b>	<b>Branch Name</b>	
	<b>Street Address</b>		<b>City</b>
<b>2nd Branch</b>	<b>Branch Number</b>	<b>Branch Name</b>	
	<b>Street Address</b>		<b>City</b>
<b>3rd Branch</b>	<b>Branch Number</b>	<b>Branch Name</b>	
	<b>Street Address</b>		<b>City</b>

Return to: Michigan Dept. of State, Business Licensing Section **(email as an attachment to [licensing@michigan.gov](mailto:licensing@michigan.gov))**.

If you do not have access to email, please fax to 517-335-2810.