



John J. Barthelmes  
Commissioner of Safety

# State of New Hampshire

## DEPARTMENT OF SAFETY DIVISION OF MOTOR VEHICLES

STEPHEN E. MERRILL BUILDING  
23 HAZEN DRIVE, CONCORD, NH 03305  
Telephone: (603)227-4000 TDD Access Relay NH 7-1-1



Elizabeth Bielecki  
Director of Motor Vehicles

DEALER NUMBER: \_\_\_\_\_  
DEALER CORPORATE NAME: \_\_\_\_\_  
DEALER TRADE NAME: \_\_\_\_\_  
MAILING ADDRESS: \_\_\_\_\_  
LEGAL ADDRESS: \_\_\_\_\_  
TELEPHONE NUMBER: \_\_\_\_\_  
OWNER'S NAME: \_\_\_\_\_

AUTHORIZED NEW HAMPSHIRE INSPECTION STATION NUMBER: \_\_\_\_\_  
STATION NAME: \_\_\_\_\_  
MAILING ADDRESS: \_\_\_\_\_  
LEGAL ADDRESS: \_\_\_\_\_  
TELEPHONE NUMBER: \_\_\_\_\_  
OWNER'S NAME: \_\_\_\_\_

*261:103-a (e) A duly executed service agreement on forms provided by the department with a service or repair garage which is a licensed inspection facility within a reasonable distance from the applicant's established place of business, if applicant does not have facilities at the applicant's established place of business to service or repair motor vehicles.*

The below owners signatures of the aforementioned facilities, have entered into this service agreement to inspect, service or repair motor vehicles for the specified dealer, to expire upon dealer license expiration.

Immediate notification is required, in writing, if there is any interruption of service or cancellation of this agreement.

The undersigned of this service agreement understand and certify that **ANY FALSE STATEMENTS ARE PUNISHABLE UNDER RSA 641.3**

DEALER OWNER SIGNATURE: \_\_\_\_\_  
DEALER OWNER PRINTED NAME: \_\_\_\_\_  
DATE: \_\_\_\_\_

INSPECTION STATION OWNER SIGNATURE: \_\_\_\_\_  
INSPECTION STATION OWNER PRINTED NAME: \_\_\_\_\_  
DATE: \_\_\_\_\_