



North Carolina State Highway Patrol

Josh Stein
Governor

Freddy L. Johnson, Jr.
Commander

TO:

FROM: NORTH CAROLINA STATE HIGHWAY PATROL
INVESTIGATIVE SERVICES UNIT – DEALER SECTION

SUBJECT: RENEWAL OF DEALER PLATES FOR MID-TERM YEAR OF DEALER LICENSE

If you do not receive the pre-printed Renewal Applications Packet of Dealer Plates (Mid-Term Year), use the information in this letter to complete the forms listed below. Refer to your Registration Card to determine when plates will expire.

Please follow the instructions below in completing the renewal applications:

1. Review applications for accuracy and complete in their entirety.
2. If there are any changes in your dealership name or address as stated on your printed Dealer License or in ownership, please go to the Dealer Section webpage <https://www.ncshp.gov/investigative-services-unit> for directions and assistance. **Do not send for processing.**
3. The fee for the first five (5) dealer plates is \$46.25 each plus the transit tax if applicable (see note below). All plates purchased after the first five (5) will be \$23.13 each plus any transit tax. All dealer transporter plates are \$23.13 each plus any transit tax. Dealer loaner plates are \$200.00 each plus any transit tax.
4. Late Fees: A late fee of \$15.00 per plate will be charged on renewals beginning the first day of the month following the expiration date.

NOTE: Dealers, Manufacturers, Factory Branches, Distributors, and Wholesalers that have their place of business located in a Transit (RTA) Tax County are required to pay an additional Regional Transportation Authority (RTA) Tax for each plate purchased as listed below:

- Wake/Orange/Durham Counties: \$17.00 additional per plate/year.
 - Randolph County: \$1.00 additional per plate/year.
5. N.C.G.S § 20-79 governs the number of dealer plates that a dealer may purchase based upon the number of vehicles sold in the previous twelve-month period. N.C.G.S § 20-79.2(b1) governs the number of transporter plates that a dealer may purchase. The total number of dealer and transporter plates issued to a dealer may not exceed the number of plates that can be issued to the dealer under N.C.G.S. § 20-79(b). Plates will be issued based on the following scale:

MAILING ADDRESS:

NCSHP – Dealer Section
3129 Mail Service Center
Raleigh, NC 27697
www.ncshp.gov

TELEPHONE:

(919) 757-0756 (Raleigh)
(704) 331-3299 (Huntersville)



An Equal Opportunity Employer

Rev. 02/26

OFFICE LOCATION:

Raleigh Dealer Section
4123 New Bern Ave. Ste. #151
Raleigh, NC 27610
Huntersville Dealer Section
12101 Mount Holly-Huntersville Rd.
Huntersville, NC 28078



North Carolina State Highway Patrol

Josh Stein
Governor

Freddy L. Johnson, Jr.
Commander

Vehicles Sold in a Relevant 12-Month Period	Maximum Number of Plates
Fewer than 12	3
At least 12 but less than 25	6
At least 25 but less than 37	7
At least 37 but less than 49	8
49 or more	At least 8, but no more than 5 times the average number of qualifying sales representatives employed by the dealer during the relevant 12-month period.

- To indicate which classifications of plates are needed, complete the enclosed ISU-405 and submit with the ISU-403A.
- The review and completion of the ISU-403A Renewal Application for Dealer Plates (Mid-Term Year) is used to verify dealer license information for accuracy and to document plate fees and insurance certification.
- The enclosed Affidavit (ISU-418) must be completed in its entirety and must be notarized. Only original documents will be accepted. Copies will not be accepted.
- Please provide the garage liability insurance company underwriter's name and policy number information. The complete name of the insurance company underwriter must be listed. *Agent's name is not acceptable.*
- You should total all fees and submit applications and fee remittance. Make check or money order payable to the NC Division of Motor Vehicles.

Applications should be mailed to:

NC State Highway Patrol – Dealer Section
3129 Mail Service Center
Raleigh, NC 27697-3129

We encourage you to return your application and fees by mail to the North Carolina State Highway Patrol Dealer Section as soon as possible, so that you will receive your licenses and plates prior to your renewal date. Thank you for your prompt attention to the renewal request.

MAILING ADDRESS:

NCSHP – Dealer Section
3129 Mail Service Center
Raleigh, NC 27697
www.ncshp.gov

TELEPHONE:

(919) 757-0756 (Raleigh)
(704) 331-3299 (Huntersville)



An Equal Opportunity Employer

Rev. 02/26

OFFICE LOCATION:

Raleigh Dealer Section
4123 New Bern Ave. Ste. #151
Raleigh, NC 27610
Huntersville Dealer Section
12101 Mount Holly-Huntersville Rd.
Huntersville, NC 28078

NORTH CAROLINA STATE HIGHWAY PATROL
INVESTIGATIVE SERVICES UNIT – DEALER SECTION
3129 MAIL SERVICE CENTER, RALEIGH NC 27697

RENEWAL APPLICATION FOR DEALER PLATES (MID-TERM YEAR)

Dealer Number: _____ Expiration Date: _____

1. FIRM NAME AND ADDRESS. (*Please contact a local NCSHP office with any name and/or address changes.)

Firm Name: _____

Address: _____ City: _____ State: _____ Zip Code: _____

2. DEALER TYPE: **FRANCHISE** or **INDEPENDENT**

List Current Franchise(s): _____

Were any franchises added or dropped? Yes No
 If yes, list all Added or Dropped Franchise(s) in the section below:

Franchise(s) Added*	Franchise(s) Dropped

***Attach franchise agreement(s) and Modify Dealer Report if making additions.**

3. OWNERSHIP: (Check appropriate block) INDIVIDUAL PARTNERSHIP CORPORATION LLC

List name, address and title of Owner, Partner or Officers of Corporation (use reverse side if needed)
 Complete ISU-400B if minor ownership or officer change.

<u>NAME</u>	<u>ADDRESS</u>	<u>TITLE</u>

4. Dealer Continuing Education (6-hour) Course Certificates are not required to be submitted during the Mid-Term Plate Renewal period; however, Used Motor Vehicle Dealers are required to complete one 6-hour Dealer Continuing Education course approved by the Division for each year of the licensing period immediately preceding the renewal as required by N.C.G.S. § 20-288(A1). Be prepared to submit two (2) Certificates at with next Dealer License Renewal.

5. I certify that, as proprietor, partner or corporate officer of this firm, I have authority to sign and submit this application, and the statements contained therein are true and correct.

Printed Name _____ Title _____

Signature _____ Date _____

6. FEES

Total Plate fees from ISU-405.....\$ _____
 Temporary Markers - \$25.00 per set of 25..... **Motorcycle** _____ **Auto** _____ \$ _____
Total fees enclosed \$ _____

7. INSURANCE CERTIFICATION MUST BE COMPLETED.

This is to certify that I have liability insurance with _____
Policy Number _____ as required by the North Carolina Financial Responsibility Act of 1957 and certify
there has not been a license plate revocation.

8. Is the owner, partners, or any members of the corporation, listed on this application, active-duty military,
a military veteran, or a military spouse? **Yes** or **No**

If yes, complete the information below:

Name	Active-Duty Military	Military Veteran	Military Spouse

***Notice: If there is a change of name, address and/or ownership, do not forward this renewal to the Dealer Section
without contacting a local NCSHP office.***

Signature of Applicant: _____

Date: _____ County: _____ State: _____

I certify that the following person personally appeared before me this day, each acknowledging to me that he or she
voluntarily signed the foregoing document for the purpose stated therein and, in the capacity indicated:

_____ (name of principal).

Notary Signature: _____ Notary Printed or Typed Name: _____

(SEAL)

My Commission Expires: _____

NORTH CAROLINA STATE HIGHWAY PATROL
INVESTIGATIVE SERVICES UNIT – DEALER SECTION
3129 MAIL SERVICE CENTER, RALEIGH, NC 27697

APPLICATION FOR DEALER PLATES

Dealer plates are issued for two (2) years to align with the expiration of the dealer licenses and are required to be replaced every four (4) years. Reference Session Law 2025-22 (House Bill 421).

DEALER LICENSE NUMBER: _____ EXPIRATION DATE: _____

(A) DEALER PLATES. Use the following worksheet to calculate plate fees. The first five (5) plates renewed and/or issued are \$46.25 per plate per year. Additional plates renewed and/or issued are \$23.13 per plate per year.

NOTE: The ISU-418 (Affidavit) determines the number of plates your Dealership is eligible for. The Regional Transportation Authority (RTA) Tax are calculated as follows:

Wake/Orange/Durham Counties- \$17.00 additional per plate/year.
Randolph County- \$1.00 additional per plate/year.

1. Number of Dealer Plates indicated on **ISU-419** for renewal and/or replacement: _____

2. Additional/New Dealer plates requested. (Enter quantity beside each type of plate requested)

_____ Independent Dealer _____ Franchise Dealer _____ Motorcycle Plate _____ Exempt Trailer

_____ Manufacturer Plate _____ Motorcycle Manufacturer

3. Quantity of Dealer plates (up to five) _____ x **\$46.25 each/year** + Transit Tax \$ _____ = Total Fee \$ _____

4. Quantity of additional Dealer plates _____ x **\$23.13 each/year** + Transit Tax \$ _____ = Total Fee \$ _____

(B) DEALER TRANSPORTER PLATES

5. Number of Dealer Transporter plates indicated on **ISU-419** for renewal and/or replacement: _____

6. Number of Additional/New Dealer Transporter plates requested: _____

7. Total Dealer Transporter plates _____ x **\$23.13 each/year** + Transit Tax \$ _____ = Total Fee: \$ _____

(C) LOANER DEALER PLATES. Only Franchise Dealerships are eligible to obtain these plates.

8. Number of Loaner Dealer plates indicated on **ISU-419** for renewal and/or replacement: _____

9. Number of Additional/New Loaner Dealer plates requested: _____

10. Total Loaner Dealer plates _____ x **\$200.00 each/year** + Transit Tax \$ _____ = Total Fee: \$ _____

11. Late fee per plate within one month of expiration. Number of plates _____ X \$15.00 Late Fee: \$ _____

LATE FEES: A late fee of \$15.00 per plate will be charged on renewals beginning the first day of the month following the expiration date

12. Add lines 3, 4, 7, 10 and 11= **GRAND TOTAL \$** _____

(Enter total on ISU-403, ISU-403A or ISU-400)

**NORTH CAROLINA STATE HIGHWAY PATROL
INVESTIGATIVE SERVICES UNIT – DEALER SECTION
3129 MAIL SERVICE CENTER, RALEIGH, NC 27697-3129**

AFFIDAVIT

Dealer No: _____

This is to certify that I have the authority to sign for _____
Dealership Name

and that the answers given to the following questions are true and correct.

1. What is the average number of qualifying sales representatives you have employed during the previous twelve (12) months? _____

NOTE: A qualifying sales representative is a person who works twenty-five (25) hours per week on a regular basis and is compensated by the dealer for their work.

2. How many vehicles/trailers were sold by your dealership in the previous twelve (12) months? _____

NOTE: A sale requires a transfer of ownership and a reassignment of title.

I understand that any false or incorrect statement may result in the revocation of my dealer license and possible criminal prosecution.

An active dealer bond is required to operate as a North Carolina automotive dealer. If you have obtained a new bond since your last renewal, you must submit the original signed and sealed copy to the Dealer Unit for recording.

ACKNOWLEDGEMENT

I certify that the above information is true and accurate to the best of my knowledge.

Signature of Dealership Corporate Officer, LLC Member, Partner or Proprietor

Date

Signature of Applicant: _____

Date: _____ County: _____ State: _____

I certify that the following person(s) personally appeared before me this day, each acknowledging to me that he or she voluntarily signed the foregoing document for the purpose stated therein and, in the capacity, indicated:

(Name of principal(s)).

Notary
Signature: _____

Notary Printed
or Typed Name: _____

(SEAL)

My Commission Expires : _____

**NORTH CAROLINA STATE HIGHWAY PATROL
INVESTIGATIVE SERVICES UNIT – DEALER SECTION
3129 MAIL SERVICE CENTER, RALEIGH, NC 27697-3129**

RENEWAL APPLICATION FOR DEALER AND TRANSPORTER PLATES

License Number: _____ Expiration Date: _____

1. Have any of your current plates or the ones listed below been lost, stolen, mutilated or are no longer in your possession? **YES** **NO**

If yes, please list those plates and indicate whether each plate is **LOST, STOLEN, or MUTILATED:**

2. Please select the appropriate category(s) for plate renewal:

a. PLATE CATEGORY:

b. PLATE CATEGORY:

c. PLATE CATEGORY:

d. PLATE CATEGORY:

e. PLATE CATEGORY: