



Robert L. Quinn
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: _____