



**RETAIL PREMISE AUTHORIZATION FORM**

\_\_\_\_\_

(date)

I \_\_\_\_\_ of \_\_\_\_\_ holding a current  
(directors name) (business name)

AMVIC licence # \_\_\_\_\_ do here by grant \_\_\_\_\_ of  
(directors name)

\_\_\_\_\_ permission to store vehicles on my lot located at  
(business name)

\_\_\_\_\_ for the purpose of retail vehicle sales.  
(business address)

Signed,

\_\_\_\_\_  
(signature or director granting permission)

\_\_\_\_\_  
(print name)