



*Department of  
the Secretary of State  
**Bureau of Motor Vehicles***

**STATE OF MAINE  
TEMPORARY AUCTION PERMIT REQUEST**  
(minimum of 48 hours' notice required)

**\*PLEASE PRINT CLEARLY\***

Applicant's Name: \_\_\_\_\_

Legal Business Name: \_\_\_\_\_

Business Physical Address: \_\_\_\_\_  
Street City/Town Zip

Phone Number: \_\_\_\_\_ Auction License Number: \_\_\_\_\_

**We are requesting a permit to conduct an off premises auction to be held at the following location:**

Street Address: \_\_\_\_\_

City/Town: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**To be held on:**

Day: \_\_\_\_\_ Month: \_\_\_\_\_ Year: \_\_\_\_\_

\_\_\_\_\_  
Signature Official Title Date

Application may be emailed to: [Dealerlicensing.bmv@maine.gov](mailto:Dealerlicensing.bmv@maine.gov)  
Or faxed to: (207) 624-9126

If you have questions, please feel free to contact Dealer Licensing at (207) 624-9000 ext. 52143.