



Petition for Variance

Minnesota Rule Part 7406.0500-Credit Card Acceptance for Driver License Agents and Deputy Registrars

DL Agent/Deputy Registrar Section

A Driver's License Agent and/or Deputy Registrar may apply for a credit card acceptance variance by completing the application below. The request will be reviewed and denied or granted within 30 days of receipt, or within 30 calendar days from the date the commissioner's request for additional information, whichever is later. Failure of the Driver's License Agent and/or Deputy Registrar to submit the additional information requested within 15 calendar days of the request is cause for the commissioner to deny a request for variance.

E-Mail this form and any supplemental material to:

dvs.deputycreditcard@state.mn.us

Subject line: ATTN: FRANKIE- Credit Card Variance

If you have questions or need additional information please email Frankie at: dvs.deputycreditcard@state.mn.us

Name of Office			Deputy Number	
Address			Contact Name	
City	State MN	Zip Code	Contact Phone Number	
Date:			Contact e-mail address	

- The following items must be submitted with your petition:**
- A written statement of reasons why credit card acceptance would impose economic hardship (e.g. Cover letter from deputy registrar accompanied with a Letter of Credit denial letter/statement from financial institution)
 - Bank statements for the office for the preceding three months
For your financial protection please redact (e.g. black out) financial accounting and routing information

I. The average number and average amount of motor vehicle transactions in the deputy registrar's office during the preceding year:

II. Additional information for variance consideration:
(e.g. ATM available for alternative customer financial option; include costs imposed by ATM to customer)

I attest to the accuracy of the information provided in this petition.

_____ Date _____
 Deputy Registrar or DL Agent Appointee *

Central Office Use Only		
Approved <input type="checkbox"/>	Denied <input type="checkbox"/> Specify:	Need more Information <input type="checkbox"/> Specify:

X _____ (DVS Signature and Date)

Instructions

Please complete this form electronically and save an electronic copy for your records. After saving the document please print a copy of the form, attach financial statements for the preceding three months (please black out all financial routing and account information) and sign and date the document. You are also advised to retain a copy of the signed Petition for Variance. Remember, the only person authorized to sign is the person who has been duly appointed as the Deputy Registrar and/or Driver's License Agent. If an unauthorized signature is submitted the Petition will be rejected and returned.

If you have any questions or concerns please contact Frankie at dvs.deputycreditcard@state.mn.us or the DVS Vehicle Service Liaison assigned to your office.

Please e-mail your Petition for Variance and supporting documents to:

dvs.deputycreditcard@state.mn.us

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