

OHIO DEPARTMENT OF PUBLIC SAFETY BUREAU OF MOTOR VEHICLES

USED MOTOR VEHICLE DEALER APPLICATION

Failure to complete <u>ANY</u> portion of this application will delay the processing of the license. By completing, signing, and submitting this application with all required documentation, as applicable, you are affirming that the established place of business meets all the requirements of Chapter 4517 of the Ohio Revised Code (R.C.) and Chapter 4501:1-3 of the Ohio Administrative Code (O.A.C.).

Yes No Are you, the applicant or anyone listed in the ownership section of this application (pg. 2) a manufacturer or affiliated entity with a manufacturer?							
Yes No Are you, the applicant or anyone listed in the ownership section of this application (pg. 2) a veteran or member of the armed forces or a surviving spouse of a veteran or member of the armed forces? (NOTE: A completed application with the required documentation of military status qualifies the applicant for an expedited application process, upon receipt.)							
If "yes", please provide a copy of your or your spouse's DD214, separation documentation, or other official military documentation approved by the board.							
INDICATE THE TYP	PE OF VEHICLES THAT WILL B	E THE D	EALERSHIP'S PRIM	ARY BUS	INESS		
☐ Used Motor Vehicle	es - (regular sized license plate)						
☐ Used Motorcycles -	(motorcycle sized license plate)						
☐ Used All-Purpose V	ehicles (APV) - (motorcycle sized lid	cense plate	e)				
Used Trailers (ONL	Y over 4,000 lbs) - (regular sized lice	ense plate))				
	ates are available for trailers under 4 tion (BMV 4371) for Utility Trailer pla		/isit our Web site at <u>ww</u>	w.OhioAuto	Dealers.com t	for more information	
	PLE	ASE WR	ITE LEGIBLY				
DEALERSHIP INFO							
REGISTERED BUSINES	REGISTERED BUSINESS NAME, SOLE PROPRIETOR OR PARTNERSHIP BUSINESS NAME (See NOTE 1)						
DATE REGISTERED WITH SECRETARY OF STATE STATE OF INCORPORATION (IF A CORPORATION)							
NOTE 1: A copy of the Certificate from the Secretary of State MUST accompany the application for the registered business name.							
REGISTERED FICTITIOUS NAME OR TRADE NAME (See NOTE 2) DATE OF REGISTRATION					RATION		
NOTE 2: A copy of the Certificate from the Secretary of State <u>MUST</u> accompany the application for the registered fictitious or trade name, if applicable.							
DEALERSHIP STREET A	ADDRESS			P.O.	BOX #	SUITE #	
CITY STATE ZIP CODE					ZIP CODE		
COUNTY BUSINESS TELEPHONE # ALTERNATE TELEPHONE #					PHONE #		
BUSINESS E-MAIL ADDRESS							
(Please include a valid business e-mail address to receive electronic notification(s) on the processing of your application.)							
FEDERAL EMPLOYEE IF	DENTIFICATION NUMBER (FEIN)		VENDOR'S #				
. LDLIVIL LIVII LOTEL IL	SELTIM TOTAL HOMBER (I EIIV)		, Σ. (DOI(O π				
NAME OF BOND CARRII	ER		BOND #		EXPIRATION	DATE	
					•		

HOURS OF OPERATION

<u>ALL</u> licensed used motor vehicle dealers are required to be open to the public for five (5) hours a week, with at least two (2) of those hours between 8 A.M. – 5 P.M. Monday through Friday (O.A.C. 4501:1-3-08).

• •		-	• • •	•	
	OPEN	CLOSE		OPEN	CLOSE
MONDAY			SATURDAY		
TUESDAY			SUNDAY		
WEDNESDAY					
THURSDAY					
FRIDAY					
lic	cense (R.C. 4517.05).	•	completed <u>prior</u> to app		
			s application (pg. 2) succeeding the receipt date of t		ed motor vehicle
	If "yes" a	a Certificate MUST be	e submitted with the app	olication.	
	lf " no " <i>y</i>	ou <u>MUST</u> list the exem	ption reason for not takin	g the course.	
	Exempti	ion Reason:			
		IMPORTANT IN	NFORMATION		
	icense may be denie				
 Having been consection 9.79 of 		ding of guilt of, or ple	ea of guilty to a disqual	ifying offense as dete	ermined under
		alifving offenses. vi	sit our website at ww	w.OhioAutoDealers	.com.
		,			
OWNERSHIP INFO	RMATION (R.C. 4517	04 4517 12 and Ω	A.C. 4501:1-3-07, 450	1·1-3-09)	
	•	•	•	•	must request
 All Ohio residents who are listed on this application MUST be electronically fingerprinted. Applicants must request that the results be sent electronically to direct copy "BMV Dealer Licensing" at the web check locations in order for 					
them to be forwarded to the BMV Dealer Licensing Section. (For a complete list of electronic fingerprinting locations in					
Ohio, visit <u>www.ohioattorneygeneral.gov</u> .)					
All out-of-state applicants, or those who qualify for electronic exemption that are listed on this application, MUST					
submit a fingerprint card (supplied by Dealer Licensing or Ohio Attorney General's Office), exemption form, and					
fingerprint card processing fee with the application for license. Contact the Dealer Licensing Section at (614) 752-7636 to request that a fingerprint card and exemption form be mailed to you					
All individuals listed on this application are required to complete a criminal history record through the Bureau of					
			ureau of Investigatio		
	of a BCI criminal his		aroud or miroonguno	(. 2.) 0	o. y 10001 a 10 1101
NOTE: Some back	around checks could	take BCI up to thir	ty (30) days for proce	essina.	
☐ Sole Proprietor	Limited Liability (•	Business Trust (<i>Tr</i>		ership (<i>Partners</i>)
) (President, Vice Pres		_ `	Registered Entity+	(*)
<u> </u>	, ,			registered Entity+	
TITLE	ed to show the registe	rea ownersnip struct	ure.		
Sole Proprietor	☐ President	☐ Member (own	ing 10% or more)	Partner	☐ Trustee
FIRST NAME		MI	LAST NAME		SUFFIX (Jr., Sr., ETC.)
HOME ADDRESS				SSN	
HOME ADDRESS				35N	
CITY		STATE	ZIP CODE	TELEPHON	NE #
ELECTRONIC FINGERP	KINTS COMPLETED.		DATE COMPLETED		

TITLE ☐ Vice President	Member (owning 10% or	more)	☐ Par	tner	☐ Trustee		
FIRST NAME		MI		NAME			SUFFIX (Jr., Sr., ETC.)
HOME ADDRESS						SSN	
CITY		STATE	ZIP C	ODE		TELEPHO	NE #
ELECTRONIC FINGERPR	INTS COMPLETED.		DATE	COMPLETED)		
☐ Yes ☐ No							
TITLE							
☐ Treasurer	☐ Member (owning 10% or	more)	☐ Par		☐ Trustee		
FIRST NAME		MI	LAST	NAME			SUFFIX (Jr., Sr., ETC.)
HOME ADDRESS			•			SSN	
CITY		STATE	ZIP C	ODE		TELEPHO	NE#
ELECTRONIC FINGERPR	INTS COMPLETED.		DATE	COMPLETED)		
TITLE ☐ Secretary	Member (owning 10% or	· more)	☐ Par	tner	☐ Trustee		
FIRST NAME		MI	LAST	NAME			SUFFIX (Jr., Sr., ETC.)
HOME ADDRESS						SSN	
CITY		STATE	ZIP C	ODE		TELEPHO	NE #
ELECTRONIC FINGERPR Yes No	INTS COMPLETED.		DATE	COMPLETED)		
Any additional persons	please list on a separate sheet	t of paper and	attach v	vith this appl	ication.		
	wledge and belief, I, the appl and the subsequent stateme						
Yes No 1.	Does the business listed on th	is application h	nave a r	et worth of a	at least seventy f	ve thousan	d dollars (\$75.000)?
	No dealer shall be issued a licer = Assets minus Liabilities) in th Net worth <u>MUST</u> be maintained	nse or permitte e sum of \$75,00	d to ope 00 and <u>n</u>	rate under a <u>nust</u> be verifi	license unless the able upon reques	dealer has	a net worth (Net Worth
	Does the business listed on th					dollar (\$25	000) surety bond?
103 110 2.	No dealer shall be issued a lice bond in the registered busines: <u>Attorney General's Office</u> (addinapplication.)	ense or permitte s name in the a	ed to ope	erate under a of \$25,000 and	license unless that the original sure	e dealer has ty bond is p	secured a surety osted with the
	The surety bond MUST be main	_		-			
	MAILING ADDRESS FOR ORIG Bond, 30 E. Broad Street, 14th Fl				Consumer Protection	n Section, At	tn: TDRF Unit Surety
☐ Yes ☐ No 3.	Does any person listed on this	application ha	ave an o	wnership int	erest in another	motor vehic	le business entity?
Yes No 4.	Has any person listed on this distributor's license, auction o		-	• •			•
	license, salvage motor vehicle				-	-	
	(If yes, please list below; subr	mit any additio	nal infor	mation on a	separate sheet o	of paper.)	
BUSINESS NAME APPLIE	ED IN	DATE		TYPE OF LI	CENSE	PERMIT # (if issued)
	<u>l</u>						

☐ Yes	□No	5.	Has any person listed on this application ever had their dealer's license suspended or revoked?
☐ Yes	☐ No	6.	Has any person listed on this application ever been convicted of, judicial finding of guilt of, or plea of guilty to a disqualifying offense as determined under section 9.79 of the R.C. in this state or any other state?
			For a complete list of disqualifying offenses, visit our website at www.OhioAutoDealers.com.
			If answered "yes", please provide the following certified documents and information:
			(1) A certified copy of a conviction or journal entry;
			(2) A certified copy of the sentencing entry; and
			(3) A certified copy of the indictment or complaint.
			If in another state, list the state(s):
☐ Yes	□No	7.	Has any person listed on this application ever had a civil judgment rendered against them that was related to tampering with an odometer, rolling back an odometer, or failing to provide true and accurate odometer disclosure statements?
			If answered "yes", please provide the following certified documents and information:
			(1) A certified copy of a journal entry showing the final disposition of the judgment;
			(2) The court of jurisdiction that decided the civil judgment;
			(3) The court's case number; and
			(4) The date the civil judgment was issued
☐ Yes	□No	8.	Does any person listed on this application have an unsatisfied civil judgment resulting from a motor vehicle transaction? (e.g. Title Defect Rescission Fund)
			If answered "yes" please provide the following certified documents and information:
			(1) A certified copy of a journal entry showing the final disposition of the judgment;
			(2) The court of jurisdiction that decided the civil judgment;
			(3) The court's case number; and
			(4) The date the civil judgment was issued.
ESTABI	LISHED I	PLA	CE OF BUSINESS (R.C. 4517.03 and O.A.C. 4501:1-3-08)
_	L ISHED I	PLA A.	CE OF BUSINESS (R.C. 4517.03 and O.A.C. 4501:1-3-08) Has anyone listed in the ownership section of this application (pg. 2) contacted the local zoning authorities?
ESTABI ☐ Yes			Has anyone listed in the ownership section of this application (pg. 2) contacted the local zoning authorities? The issuance of a license does not supersede building codes and local zoning. The State of Ohio (BMV) Dealer Licensing Section is the regulator of motor vehicle dealers, but it does not pre-empt the enforcement by local
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Yes No G. The established place of business was previously occupied by another licensed motor vehicle dealer. If "yes", give the business name, if available	
Yes No H. The established place of business consists of a service facility that is owned and operated by <u>each</u> personal listed in the ownership section of this application. A permanent physical barrier between the dealership service facility (<u>this does not include a motor vehicle salvage licensed location</u>) is not required if the service facility that is used to perform service on motor vehicles and the established place of business meet the following requirements:	and ⁄ice
(1) The service facility is owned and operated by each person listed on the dealer license;	
(2) The display lot has distinguished area(s) that are identified through signage for the motor vehicles are being repaired, the motor vehicles that are being offered for sale, and customer parking;	s that
(3) A private office is available that is conducive to transacting business in a confidential manner req the sale of a motor vehicle. (REFER TO REQUIREMENTS FOR OFFICE)	jarding
Yes No I. The established place of business has a sign that displays the exact registered business name and any registered fictitious or trade names as filed with the Secretary of State.	
The law requires that the letters be no less than six (6) inches high and that the sign be permanent, prop maintained, and prominently displayed by the entrance of the office, if not visible from the public roadway	

PHOTOGRAPHS

REQUIRED at the time of application, clear photographs of the location **MUST** be submitted via mail or e-mail (JPEG format) that show the following:

- (1) the display lot (3,500 sq. ft.)
- (2) the permanent physical barrier showing the designation of the display lot
- (3) the Service facility, if applicable
- (4) the separation from another business and/or residence
- (5) the office (inside and outside)
- (6) the sign with the registered business name, including any registered fictitious or trade names
- (7) the posted business hours must notify BMV if they change
- (8) the posted business telephone number must notify BMV if changed
- (9) a view of the established place of business from across the street

NOTE: If photographs are not clear or not an accurate representation of the location, additional photos will be requested.

PHOTOS MAY BE SUBMITTED BY MAIL WITH THE APPLICATION OR BY E-MAIL (JPEG format) TO <u>dealerphotos@dps.ohio.gov.</u>

(If submitted by e-mail, please include dealership name and county in the subject line.)

FEES ARE NON-REFUNDABLE

Make check payable to "Ohio Treasurer of State." Fees are as follows: (DO NOT SEND CASH)

GRAND TOTAL FEE	\$
**Additional Plate(s) (Optional) \$10.25 x	\$
SUBTOTAL FEE	\$ 254.75
Master Plate	\$ 50.25
Postage	\$ 4.50
Permit	\$ 50.00
Title Defect Rescission Fund*	\$ 150.00

*The BMV is required to collect a \$150.00 initial application fee on behalf of the Title Defect Rescission Fund. For information or questions on the Title Defect Rescission Fund, contact the Ohio Attorney General's Office at www.ohioattorneygeneral.gov or 1-800-282-0515.

The requested number of plates is based upon the projected sales v automatically occur upon renewal of the license or upon the request plates shall not be used contrary to R.C. 4503.30 and may be subject	of the registrar. It is understood that dealer
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Annual Sales	Max. plates
1 - 10	2 plates
11 - 25	3 plates
26 - 49	4 plates
50 - 99	5 plates
100 - 250	10 plates
251 +	unlimited

^{**} Additional plates may be requested and renewed based upon annual sales (see chart).

PLEASE ALLOW 4 - 6 WEEKS FOR THE PROCESSING OF COMPLETED LICENSE APPLICATIONS.

✓ **NOTE:** The 4 - 6 weeks is from the time that the Dealer Licensing Section receives the application.

FAILURE TO COMPLETE ANY PORTION OF THIS APPLICATION WILL DELAY THE PROCESSING OF THE LICENSE.

✓ NOTE: All changes, including officers, business name, address and hours of operation <u>MUST</u> be reported to Dealer Licensing within fifteen (15) days of the change.

It is understood that at the discretion of the Registrar, a physical inspection will be performed by BMV Investigations prior to or after the issuance of the license and at any given time during the period which the license is held.

I understand that if the licensed location fails to meet any of the requirements or fails to maintain compliance, it will immediately be referred to the Motor Vehicle Dealers Board for possible suspension or revocation of the license.

I understand that the Registrar of motor vehicles must be notified if there is a change of status at the licensed location, including but not limited to, personnel of ownership, relocation of the place of business, posted business hours, and telephone number.

I understand that this application may be denied if any individual listed under the ownership has been convicted of, judicial finding of guilt of, or plea of guilty to a disqualifying offense as determined under section 9.79 of the R.C. Notification of an administrative hearing shall be given to the applicants in a timely manner upon notification to the Board of such a conviction.

I affirm that the motor vehicles owned by this business will be insured or have other financial responsibility coverage, will not be operated without financial responsibility coverage, and will not be used as commercial vehicles unless so registered.

I, as an authorized representative of the business entity or sole proprietor, acknowledge that all information in the foregoing application and in any additional documentation is true and correct.

application and in any additional documentation is	true and correct.	
PRINTED OR TYPED NAME OF SIGNER		
SIGNATURE (OWNER, PARTNER, PRESIDENT, MEMBER,	TRUSTEE, OR PRINCIPAL OWNER)	DATE OF APPLICATION
X		
Notary:		
Sworn to and subscribed in my presence this	day of	, 20
inC	County, State of	
(Notary Seal)		
Signature of Notary / Clerk / Deputy Clerk (circle	one) <u>X</u>	
My commission expires		

RETURN THE COMPLETED APPLICATION, PHOTOGRAPHS, OTHER SUPPORTING DOCUMENTS, AND FEES TO:

Ohio Bureau of Motor Vehicles Attention: Dealer Licensing Section P.O. Box 16521 Columbus, Ohio 43216-6521

For additional information and all applicable laws visit our Web site at www.OhioAutoDealers.com.

USED MOTOR VEHICLE DEALERS CHECKLIST

REMINDER:

FAILURE TO COMPLETE <u>ANY</u> PORTION OF THIS APPLICATION WILL DELAY THE PROCESSING OF THE LICENSE. PLEASE USE THE CHECKLIST BELOW TO ENSURE THAT THE FOLLOWING INFORMATION HAS BEEN COMPLETED AND ALL THE REQUIRED DOCUMENTATION IS ACCOMPANYING THE APPLICATION.

HAVE YOU...?

Registered the business entity with the Secretary of State?
☐ Included with the application a copy of the Certificate from the Secretary of State?
☐ Registered the business fictitious name or trade name with the Secretary of State?
☐ Included with the application a copy of the Certificate from the Secretary of State?
☐ Obtained a Federal Employee Identification Number (FEIN) from the Internal Revenue Service (IRS)?
☐ Obtained a Vendors Number from the County Auditor's Office?
Secured a Surety Bond with a Bond Broker for \$25,000 that is posted with the Ohio Attorney General's Office? **MAILING ADDRESS FOR ORIGINAL BOND: Ohio Attorney General, Consumer Protection Section, Attn: TDRF Unit Surety Bond, 30 E. Broad Street, 14th Floor, Columbus, OH 43215
☐ Included with the application, proof of the secured bond from the bond broker?
☐ Attended the Used Motor Vehicle Dealer Training Course?
☐ Included with the application, a copy of the Certificate of Completion from an approved course provider?
☐ Completed the electronic fingerprinting/fingerprint card process for the criminal history record, with results being sent to Dealer Licensing?
Ensured all persons listed on the application have completed the electronic fingerprinting process or fingerprinting card, as applicable?
☐ Verified that all physical requirements are in compliance with O.A.C. 4501:1-3-08?
☐ Taken all the required photographs?
☐ Included the photographs with the application or submitted them by e-mail?
☐ Had the application signed and notarized?
☐ Included with the application a check or money order made payable to "Ohio Treasurer of State"?
☐ Made a copy of the completed application, accompanying documents, and photographs for your records?

THIS PAGE IS FOR YOUR RECORDS ONLY.

(Do not send with the application.)

For additional information and all applicable laws visit our Web site at www.OhioAutoDealers.com