



OHIO DEPARTMENT OF PUBLIC SAFETY  
BUREAU OF MOTOR VEHICLES

## REQUIREMENTS AND INSTRUCTIONS FOR COMPLETING APPLICATIONS FOR CONSTRUCTION EQUIPMENT AUCTION LICENSE

### WHO NEEDS A LICENSE?

**Motor Vehicle Auction Owner:** Any person who is engaged in the business of auctioning large construction or transportation equipment and motor vehicles.

### WHAT DOES THE APPLICATION CONSIST OF?

- Application for Construction Equipment Auction License (BMV 4324):** The application must be typed or legibly printed in ink. All blocks must be completed and all questions answered on the application, including the home address and social security number of the owner, all partners, corporate officers, members, and trustees. Vendor numbers can be obtained by contacting your County Auditors Office. Federal Tax ID or Employer Identification numbers (EIN) can be obtained by contacting the Internal Revenue Service at [www.irs.gov](http://www.irs.gov) or (800) 829-4933.
- An Approved Physical Inspection of the Location:** An on-site inspection of the premises will be conducted by a Bureau of Motor Vehicles investigator to determine if the location meets ALL the physical requirements. Once a license is issued, the auction is subject to random inspections, including inspection of pertinent records. See checklist on page 2.
- Bureau of Criminal Identification & Investigation (BCI&I):** Ohio residents who are owners, all partners, the president, all members owning 10% or more and all trustees **MUST** be electronically fingerprinted and have the results forwarded to the Dealer Licensing Section, P.O. Box 16521, Columbus, Ohio 43216-6521. Visit [www.ohioattorneygeneral.gov](http://www.ohioattorneygeneral.gov) select Services, select Background Check, then select Webcheck locations for a complete listing of electronic fingerprinting locations in Ohio.
- Photo of the sign in the exact name of the business as it appears on the application, with letters at least six inches (6") high. The business sign shall be prominently displayed, properly maintained and permanent.

**NOTE: Only Out-of-State** applicants may submit a fingerprint card, exemption form and processing fee in lieu of having their prints electronically scanned. Please contact the Dealer Licensing Section at 614-752-7636 to obtain a fingerprint card and an exemption form.

### Reasons the Bureau of Motor Vehicles may DENY this application.

Found guilty of any fraudulent act in connection with selling or otherwise dealing in auctions, vehicles or equipment.

Any arrest that shows up on the criminal background check that cannot clearly be identified as a non felony or not related to dealing in motor vehicles will require journal entries showing final disposition. **Failure to submit this information will result in a delay in the processing of the application.**

### LIMITED LIABILITY COMPANY APPLICANTS

Electronic Fingerprints are required on each:

- Individual and/or;
- Member owning 10% or more of the business making application. If no members own 10% or more of the business making application, then the electronic fingerprint is required on each officer elected to represent those members. If a corporation is listed as a member of the limited liability, the president of the corporation, and the individual signing the application, if applicable, must submit an electronic fingerprint;
- If a trust is listed as a member, Trustee of the trust.

## CHECKLIST

A Construction Equipment Auction License shall have an established place of business that consists of the following physical characteristics to receive and maintain a license. Use the following checklist () to compare the characteristics of your established place of business, and make any necessary changes prior to inspection.

- Maintains a permanent auction site within this state that is at least ninety acres in size and maintains over sixty thousand square feet of total facility space.
- The construction auction shall be primarily in the business of selling large construction and transportation equipment, receives more than one million dollars in gross annual sales in this state, and derives not more than ten percent of the person's gross annual sales revenue in this state from the sale of motor vehicles having a gross vehicle weight rating of ten thousand pounds or less.
- A permanent sign in the exact name of the business as it appears on the application, with letters at least six inches (6") high. The business sign shall be prominently displayed, properly maintained and permanent.
- Posted business hours. The business hours shall be posted in a conspicuous place near the entrance of the construction equipment auction's premises.
- The office and auction shall be kept neat and orderly at all times and shall not be used as storage or other utility area. The office shall be clearly identified, easily accessible, and open for business during business hours.

### DO YOU NEED IN-TRANSIT PLATES?

You may apply for **In-Transit** license plates to be used in conjunction with your auction business. These license plates may only be used on motor vehicles being transported from any individual, firm, or corporation to any point of destination. To obtain an **In-Transit** license plate application (BMV 4366) see our Web site: [www.OhioAutoDealers.com](http://www.OhioAutoDealers.com) for forms and information.

- A Construction Equipment Auction License shall expire five years from the date of issuance.

If you have any questions or need applications visit our Web site at [www.OhioAutoDealers.com](http://www.OhioAutoDealers.com) or call the Dealer Licensing Section at 614-752-7636.

**Return completed form to:  
Ohio Bureau of Motor Vehicles  
Dealer Licensing Section  
P.O. Box 16521  
Columbus, Ohio 43216-6521**

**[www.OhioAutoDealers.com](http://www.OhioAutoDealers.com)**



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**APPLICATION FOR CONSTRUCTION EQUIPMENT AUCTION LICENSE**

1. PLEASE PRINT LEGIBLY IN BLACK INK OR TYPE THE FOLLOWING INFORMATION

BUSINESS NAME				BUSINESS TELEPHONE NUMBER
DBA OR FICTITIOUS TRADE NAME, If applicable				ALTERNATIVE TELEPHONE NUMBER
BUSINESS STREET ADDRESS				FAX NUMBER
CITY	STATE	ZIP CODE	COUNTY	EMAIL ADDRESS

2. INDICATE STYLE OF BUSINESS

<input type="checkbox"/> PROPRIETORSHIP	<input type="checkbox"/> PARTNERSHIP	<input type="checkbox"/> CORPORATION	<input type="checkbox"/> BUSINESS TRUST	<input type="checkbox"/> LIMITED LIABILITY
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3. VENDOR'S NUMBER

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4. INDICATE FEDERAL TAX ID OR EMPLOYER ID NUMBER

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5. CONSTRUCTION EQUIPMENT AUCTION PERMIT COST

COST
\$7,500.00

MAKE CHECK PAYABLE TO: OHIO TREASURER OF STATE (DO **NOT** SEND CASH)

**FEES ARE NON-REFUNDABLE**

6. **CHECK THE APPROPRIATE BOX AND COMPLETE THE NAME, RESIDENCE ADDRESS, AND SOCIAL SECURITY NUMBER IN PART B:** If making application as a LLC, Trust, or Partnership, list **each** member, trustee, director, or partner in Part B. **EXCEPTION:** If a member, trustee, or partner is a corporation, **please** list the corporation's name, Federal Tax ID or EIN Number, and address in Part A, then list the officers of the corporation in Part B.

**6A. PART A**

<input type="checkbox"/> <b>MEMBER</b> -Use only if member is a corporation	<input type="checkbox"/> <b>TRUSTEE</b> -Use only if a trustee is a corporation	<input type="checkbox"/> <b>PARTNER</b> -Use only if a partner is a corporation	
CORPORATE BUSINESS NAME			FEDERAL TAX ID OR EIN
ADDRESS	CITY	STATE	ZIP CODE

**6B. PART B**

<input type="checkbox"/> Sole Proprietor	LAST NAME	FIRST NAME	MI
<input type="checkbox"/> Partner			
<input type="checkbox"/> President	HOME ADDRESS		SSN
<input type="checkbox"/> Trustee			
<input type="checkbox"/> Director	CITY	STATE	ZIP CODE
<input type="checkbox"/> Member, (owning 10% or more)			

<input type="checkbox"/> Partner	LAST NAME	FIRST NAME	MI
<input type="checkbox"/> Vice-President			
<input type="checkbox"/> Trustee	HOME ADDRESS		SSN
<input type="checkbox"/> Director			
<input type="checkbox"/> Member, (owning 10% or more)	CITY	STATE	ZIP CODE

<input type="checkbox"/> Partner	LAST NAME	FIRST NAME	MI
<input type="checkbox"/> Secretary			
<input type="checkbox"/> Trustee	HOME ADDRESS		SSN
<input type="checkbox"/> Director			
<input type="checkbox"/> Member, (owning 10% or more)	CITY	STATE	ZIP CODE

<input type="checkbox"/> Partner	LAST NAME	FIRST NAME	MI
<input type="checkbox"/> Treasurer			
<input type="checkbox"/> Trustee	HOME ADDRESS		SSN
<input type="checkbox"/> Director			
<input type="checkbox"/> Member, (owning 10% or more)	CITY	STATE	ZIP CODE

Ohio residents who are owners, all partners, president, all members, owning 10% or more, and all trustees **MUST** be electronically fingerprinted and **have results forwarded** to the Dealer Licensing Section, P.O. Box 16521, Columbus, Ohio 43216-6521. Visit [www.ohioattorneygeneral.gov](http://www.ohioattorneygeneral.gov), select Services, select Background Check, then select Webcheck locations for a complete listing of electronic fingerprinting locations in Ohio.

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**ANSWER EACH OF THE FOLLOWING QUESTIONS TRUTHFULLY TO THE BEST OF YOUR KNOWLEDGE**

7. I, as the applicant, affirm that the business listed on this application receives more than one million dollars in gross annual sales in the State, and derives not more than ten percent of the person's gross annual sales revenue in this State from the sale of motor vehicles having a gross vehicle weight rating of ten thousand pounds or less.

Yes  No

8. Has the applicant, or any of the applicant's owners, partners, officers, members, directors or trustees:

A.  Yes  No Previously applied for a motor vehicle dealer's license, leasing license, distributor's license, auction owner's license, motor vehicle salvage dealership, motor vehicle auction, motor vehicle salvage pool, or salesperson's license? (If yes, please list below)

BUSINESS NAME APPLIED IN	DATE	TYPE OF LICENSE	PERMIT NUMBER – IF ISSUED
BUSINESS NAME APPLIED IN	DATE	TYPE OF LICENSE	PERMIT NUMBER – IF ISSUED

B.  Yes  No Ever been refused such a license, had it suspended, or revoked?

9. Are you an owner, partner, corporate officer, member, trustee or director in any other new or used dealership, motor vehicle leasing dealership, motor vehicle distributor, motor vehicle auction, motor vehicle salvage dealership, motor vehicle salvage auction, or motor vehicle salvage pool company?

Yes  No

NAME	PERMIT NUMBER
NAME	PERMIT NUMBER

10. Has the applicant or any of the applicant's partners, officers, members, trustees or director:

Yes  No Ever been found guilty of any fraudulent act in connection with selling or otherwise dealing in auctions, vehicles, or equipment?

Any arrest that shows up on the criminal background check that cannot clearly be identified as a non-felony or not related to dealing in motor vehicles will require journal entries showing final disposition. **Failure to submit this information will result in a delay in the processing of the application.**

11. Was the proposed business location previously occupied by another licensed motor vehicle dealer? If yes, give the business name, if available:

Yes  No

BUSINESS NAME
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I affirm that all statements in the foregoing application and in any attached sheets are true and correct and that I, as proprietor, as a partner, an officer, member, or trustee, have authority to sign this application and to make the statements contained herein and have read and understand the Instructions and Checklist, (BMV 4380).

SIGNATURE (OWNER, PARTNER, PRESIDENT, MEMBER, OR TRUSTEE) <b>X</b>	DATE OF APPLICATION
PRINT OR TYPE NAME OF SIGNER	TITLE

**NOTARY:**

Subscribed and sworn to before me this \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_ in the county of \_\_\_\_\_ State of Ohio.

(SEAL)

My commission expires \_\_\_\_\_ **X** \_\_\_\_\_

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

The Ohio Bureau of Motor Vehicles  
 Attn: Dealer Licensing Section  
 P.O. Box 16521  
 Columbus, Ohio 43216-6521  
 www.OhioAutoDealers.com

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