



OHIO DEPARTMENT OF PUBLIC SAFETY
BUREAU OF MOTOR VEHICLES

**APPLICATION FOR MANUFACTURER OR DEALER IN
WATERCRAFT TRAILERS OR MOTORIZED BICYCLES**

1. INDICATE ONE ONLY:

- WATERCRAFT TRAILER MANUFACTURER
- MOTORIZED BICYCLE MANUFACTURER
- WATERCRAFT TRAILER DEALER
- MOTORIZED BICYCLE DEALER

2. PLEASE PRINT LEGIBLY IN INK OR TYPE THE FOLLOWING INFORMATION:

BUSINESS NAME				BUSINESS TELEPHONE NUMBER
BUSINESS STREET ADDRESS				FACSIMILE NUMBER
CITY	STATE	ZIP CODE	COUNTY NUMBER	EMAIL ADDRESS

3. PROPRIETORSHIP PARTNERSHIP CORPORATION LIMITED LIABILITY BUSINESS TRUST

OWNER'S, PARTNER'S, PRESIDENT'S, TRUSTEE'S, MEMBER'S NAME, ADDRESS, AND SSN	PARTNER'S, VICE PRESIDENT'S, TRUSTEE'S, MEMBER'S NAME, ADDRESS, AND SSN
PARTNER'S, SECRETARY'S, TRUSTEE'S, MEMBER'S NAME, ADDRESS, AND SSN	PARTNER'S, TREASURER'S, TRUSTEE'S, MEMBER'S NAME, ADDRESS, AND SSN

4. FEDERAL TAX I.D. NUMBER

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5. CHECKS PAYABLE TO "OHIO TREASURER OF STATE" (DO NOT SEND CASH).

MASTER PLATE (REQUIRED)	1	@	\$25.25	=	\$ 25.25
POSTAGE (REQUIRED)	1	@	\$ 4.50	=	\$ 4.50
ADDITIONAL PLATES		@	\$ 5.25 ea.	=	\$
TOTAL FEES SUBMITTED					\$

**FEES ARE NON-REFUNDABLE
BOTH SIDES OF THIS FORM MUST BE COMPLETED.**

**YOU WILL LOSE YOUR DRIVER LICENSE
IF YOU DRIVE WITHOUT INSURANCE**

- In Ohio, it is illegal to drive any motor vehicle without insurance or other financial responsibility (FR) coverage.
- It is also illegal for any motor vehicle owner to allow anyone else to drive the owner's vehicle without FR coverage.
- **PROOF OF COVERAGE IS REQUIRED:** • Whenever a police officer issues a traffic ticket • At all vehicle inspection stops • Upon traffic court appearances and • Upon random checks by the Registrar of Motor Vehicles.
- **ANY DRIVER OR OWNER WHO FAILS TO SHOW PROOF OF INSURANCE OR OTHER COVERAGE WILL:** • Lose his or her driver license until requirements are met on first offense, ONE YEAR on second offense and TWO YEARS on additional offenses • Lose his or her license plates and vehicle registration • Pay reinstatement fees of \$100.00 for first offense, \$300.00 for second offense, \$600.00 for third and subsequent offenses • Pay a \$50.00 penalty for any failure to surrender his or her driver license, license plates, or registration AND • Be required to maintain special FR coverage ("High-risk" insurance or equivalent) on file with the Bureau of Motor Vehicles (BMV) for THREE or FIVE YEARS.
- **ONCE THIS SUSPENSION IS IN EFFECT:** Any driver or owner who violates the suspension will have his or her vehicle immobilized and his or her license plates confiscated for at least 30 DAYS first offense and 60 DAYS second offense. For third or subsequent offenses, the vehicle will be forfeited and sold and the person will not be permitted to register any motor vehicle in Ohio for FIVE YEARS.
- **IF YOU ARE INVOLVED IN AN ACCIDENT WITHOUT INSURANCE OR OTHER FR COVERAGE:** In addition to all the penalties listed above, you may have • A SECURITY SUSPENSION for TWO YEARS or more and • A JUDGMENT SUSPENSION INDEFINITELY (until all damages have been satisfied).
- **THESE PENALTIES ARE IN ADDITION TO ANY FINES OR PENALTIES IMPOSED BY A COURT OF LAW.**
- **WARNING: THESE LAWS DO NOT PREVENT THE POSSIBILITY THAT YOU MAY BE INVOLVED IN AN ACCIDENT WITH A PERSON WHO HAS NO INSURANCE OR OTHER FR COVERAGE.**
- **WHEN REQUIRED, PROOF OF COVERAGE MAY BE SHOWN BY ANY OF THE FOLLOWING:** • AN INSURANCE POLICY showing automobile liability insurance of at least \$12,500 bodily injury per person, \$25,000 injury two or more persons, and \$7,500 property damage • AN INSURANCE IDENTIFICATION CARD (same coverage) • A SURETY BOND OF \$30,000 issued by any authorized surety company or insurance company • A BMV BOND SECURED BY REAL ESTATE having equity of at least \$60,000 • A BMV CERTIFICATE FOR MONEY OR GOVERNMENT BONDS in the amount of \$30,000 on deposit with the Ohio Treasurer of State • A BMV CERTIFICATE OF SELF-INSURANCE, available only to companies or persons who own at least twenty-six motor vehicles.

I affirm that the owners (or lessees of leased vehicle) now have insurance or other FR coverage and will not operate or permit the operation of this motor vehicle(s) without FR coverage; and will not be used as a commercial vehicle unless so registered.

X _____
SIGNATURE (OWNER, PARTNER, OFFICER, MEMBER, OR TRUSTEE) DATE

PRINT OR TYPE NAME OF SIGNER _____

NOTARY:

Subscribed and sworn to before me this _____ day of _____ in the county of _____ State of Ohio.

SEAL

My commission expires _____ **X** _____
NOTARY PUBLIC

*LICENSE PLATES MUST BE MANUFACTURED: PLEASE ALLOW 4-6 WEEKS FOR PROCESSING,
MANUFACTURING AND SHIPMENT OF THE LICENSE PLATES.*

RETURN COMPLETED APPLICATION AND FEE TO:
Ohio Bureau of Motor Vehicles, Attn: Dealer Licensing Section
P.O. Box 16521
Columbus, Ohio 43216-6521

www.OhioAutoDealers.com