



OHIO DEPARTMENT OF PUBLIC SAFETY
BUREAU OF MOTOR VEHICLES

LEASING MOTOR VEHICLE DEALER APPLICATION

BMV USE ONLY:

Are you or your spouse 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.)

YES NO

If "yes", please provide a copy of you or your spouse's DD214, an official military ID for verification, separation documentation, or other official military documentation approved by the board.

INITIAL	Note: The issuance of a Leasing Motor Vehicle Dealer's License does not supersede local zoning. The State of Ohio (BMV) Dealer Licensing Section is the regulator of motor vehicle dealers, but does not pre-empt the enforcement by local authorities of zoning, health, safety codes, or laws. It is recommended that each applicant check zoning regulations applicable to the proposed facility with their local authority prior to making application.
INITIAL	I affirm that I have completed the I-9 Employment Eligibility Verification form that is required to be on file with the employer under the Immigration Reform and Control Act of 1986, 8 USC 1324a (with the exception of sole proprietors).

DEALERSHIP INFORMATION

EXACT BUSINESS NAME			
BUSINESS STREET ADDRESS		P.O. BOX #	SUITE #
CITY		STATE	ZIP CODE
COUNTY	BUSINESS TELEPHONE #		ALTERNATIVE TELEPHONE #
BUSINESS E-MAIL ADDRESS			

FEDERAL EMPLOYEE IDENTIFICATION NUMBER (FEIN)	VENDOR'S #
---	------------

REGISTERED DBA OR TRADE NAME

HOURS OF OPERATION

	OPEN	CLOSE		OPEN	CLOSE		OPEN	CLOSE
SUNDAY			WEDNESDAY			SATURDAY		
MONDAY			THURSDAY					
TUESDAY			FRIDAY					

BUSINESS ENTITY INFORMATION (Mark one and complete ownership information)

<input type="checkbox"/> Sole Proprietor	<input type="checkbox"/> Corporation (<i>President, Vice President, Treasurer, Secretary</i>)	<input type="checkbox"/> Limited Liability (<i>Members</i>)
<input type="checkbox"/> Partnership (<i>Partners</i>)	<input type="checkbox"/> Business Trust (<i>Trustee</i>)	<input type="checkbox"/> Other Registered Entity* _____

*Must include a copy of the registered business entity that has been filed with the Secretary of State. You may be required to show the registered ownership structure.

NOTE:

- **If a Member of a LLC is a corporation first list** the corporation’s name, federal tax ID number, address and then list officer’s name, address, and social security number of the applicant.
- **If a Partner of a partnership is a corporation first list** the corporation’s name, federal tax ID number, address and then list officer’s name, address, and social security number of the applicant.
- **If a Trustee of a business trust is a corporation first list** the corporation’s name, federal tax ID number, address and then list officer’s name, address, and social security number of the applicant.

NOTE: Ohio residents who are **owners, partners, president, members owning 10% or more, trustees or principal owners of any “other registered entity” ownership style MUST** be electronically fingerprinted and applicants must request 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 www.ohioattorneygeneral.gov.)

NOTE: Out-of-state applicants or those who qualify for electronic exemption must submit a fingerprint card, exemption form, and fingerprint card processing fee with the application for license. Call the Dealer Licensing Section at (614) 752-7636 to obtain a fingerprint card and exemption form.

NOTE: Applications for a dealer’s license shall be denied for reasons listed in the Ohio Revised Code (R.C.) 4517.12 and 4501:1-3-09 of the Ohio Administrative Code which include:

- Conviction of **ANY** felony during the past ten (10) years.
- Conviction of **ANY** misdemeanor or felony (regardless of the conviction date) related to dealing in motor vehicles.

OWNERSHIP INFORMATION

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

APPLICANT NAME OR CORPORATION NAME		TITLE
HOME OR CORPORATION ADDRESS		SSN / FEIN
CITY, STATE, ZIP	TELEPHONE #	OWNERSHIP % (if member)
ELECTRONIC FINGERPRINTS COMPLETED? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> NOT APPLICABLE		DATE COMPLETED _____

APPLICANT NAME (first, middle, last, suffix)		TITLE
HOME ADDRESS		SSN
CITY, STATE, ZIP	TELEPHONE #	OWNERSHIP % (if member)
ELECTRONIC FINGERPRINTS COMPLETED? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> NOT APPLICABLE		DATE COMPLETED _____

APPLICANT NAME (first, middle, last, suffix)		TITLE
HOME ADDRESS		SSN
CITY, STATE, ZIP	TELEPHONE #	OWNERSHIP % (if member)
ELECTRONIC FINGERPRINTS COMPLETED? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> NOT APPLICABLE		DATE COMPLETED _____

APPLICANT NAME (first, middle, last, suffix)		TITLE
HOME ADDRESS		SSN
CITY, STATE, ZIP	TELEPHONE #	OWNERSHIP % (if member)
ELECTRONIC FINGERPRINTS COMPLETED? <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> NOT APPLICABLE		DATE COMPLETED _____

Any additional persons please list on a separate sheet of paper and attach to this application.

Answer each of the following questions truthfully to the best of your knowledge and as a representative of all persons listed in the ownership information section.

<input type="checkbox"/> Yes <input type="checkbox"/> No 1. Is the applicant a, Bank Lessor or Captive Finance Lessor (i.e. Manufacturer's finance companies)? <i>If answered "yes" refer to the PHYSICAL REQUIREMENTS FOR BANK LESSOR, CAPTIVE FINANCE LESSOR AND OUT OF STATE LEASING.</i>			
<input type="checkbox"/> Yes <input type="checkbox"/> No 2. Does the business listed on this application have a net worth of at least seventy five thousand (\$75,000) dollars? <i>No dealer shall be issued a motor vehicle dealer's license or permitted to operate under a license unless the dealer has a net worth (Net Worth = assets minus Liabilities) in the sum of \$75,000, and must be verifiable upon request of the Registrar. Net worth must be maintained during the entire period for which the license is held.</i>			
<input type="checkbox"/> Yes <input type="checkbox"/> No 3. Are you or any person listed in the ownership information section on this application, listed under another motor vehicle business entity?			
<input type="checkbox"/> Yes <input type="checkbox"/> No 4. Have you or any person listed in the ownership information section on this application, previously applied for a motor vehicle dealer's license, leasing license, distributor's license, auction owner's license, motor vehicle salvage dealership, motor vehicle salvage auction, motor vehicle salvage pool, construction equipment auction license or salesperson's license? (If yes please list below; submit any additional information on a separate sheet of paper.)			
BUSINESS NAME APPLIED IN	DATE	TYPE OF LICENSE	PERMIT # - IF ISSUED

<input type="checkbox"/> Yes <input type="checkbox"/> No 5. Have you or any person listed in the ownership information section on this application, ever had their dealer's license suspended or revoked?	
<input type="checkbox"/> Yes <input type="checkbox"/> No 6. Have you or any person listed in the ownership information section on this application, ever been convicted of a felony during the past ten (10) years?	
<input type="checkbox"/> Yes <input type="checkbox"/> No 7. Have you or any person listed in the ownership information section on this application, ever been convicted of an offense (felony or misdemeanor) that was related to the selling or dealing in motor vehicles? If answered "yes" to either question #6 or #7 above, please provide the following certified documents and information: (1) <i>The court's journal entry showing the final disposition of your conviction.</i> (2) <i>A true bill indictment or indictment summary.</i> (3) <i>The charge you were convicted of.</i> (4) <i>A short summary explaining the charge you were convicted of.</i>	
<input type="checkbox"/> Yes <input type="checkbox"/> No 8. Have you or any person listed in the ownership information section on this application, ever had a civil judgment rendered against you that related to tampering with an odometer, rolling back an odometer, or failing to provide true and accurate odometer disclosure statements?	
<input type="checkbox"/> Yes <input type="checkbox"/> No 9. Have you or any person listed in the ownership information section on this application, ever had a civil judgment rendered against you that resulted from a transaction of business as a motor vehicle dealer and remains unsatisfied? If answered "yes" to either question #8 or #9 above, please provide the following certified documents and information: (1) <i>The court's journal entry showing the final disposition of the judgment.</i> (2) <i>The court of jurisdiction that decided the civil judgment.</i> (3) <i>That court's case number.</i> (4) <i>The date the civil judgment was issued.</i>	

Yes No 10. Will any unrelated business other than a licensed motor vehicle dealer be operated from this proposed dealership location?

This includes a business operating from the building in which your office is housed and / or any other building on the proposed motor vehicle dealership location. If yes, what type of business is sharing the location, (Include business name and the relationship to this proposed motor vehicle dealership). Please provide answers on a separate sheet and submit with the application.

NOTE: The dealership's established place of business must be physically separated as affirmed in Physical Requirements.

Yes No 11. Are you or do you intend on sharing the proposed business location with another licensed motor vehicle dealer of a separate business entity or affiliation?

* If "yes", give the business name. _____

(*A Certificate of Compliance form (BMV 4347) must be submitted with this application)

Yes No 12. To your knowledge was the proposed business location previously occupied by another licensed motor vehicle dealer?

If "yes", give the business name, if available. _____

Yes No 13. Is there a permanent office of at least one hundred eighty (180) square feet of usable office area, which shall be kept in a neat and orderly fashion? The office must include at minimum the following:

Desk Three Chairs Filing Cabinet

Electric lighting sufficient for a retail office Heating of a permanent nature, sufficient for a retail office

**LEASING MOTOR VEHICLE DEALER (Bank Lessor, Captive Finance Lessor, or Out of State - ONLY)
PHYSICAL REQUIREMENTS**

Below are the physical requirements for licensure. Affirm that each requirement meets exactly as intended at the time of application and it shall remain in compliance the entire time the license is held.

INITIAL	An office shall be separated from any residence by a permanent physical barrier and contain no less than 180 square feet of usable interior office area excluding restrooms, storage or utility space. The office shall be kept neat and orderly at all times, clearly identified and used exclusively for leasing motor vehicles.
INITIAL	A sign that displays the business name in which the application is made, including any registered trade names, prominently displayed by the entrance of the office, and the marquee at the entrance of the building, if applicable.
INITIAL	Required at the time of application, the applicant must provide clear photographs (via mail or e-mail) of the location showing: (1) the office (inside and outside) (2) the sign with the business name, including any registered trade names

LEASING MOTOR VEHICLE DEALER PHYSICAL REQUIREMENTS

Below are the physical requirements for licensure. Affirm that each requirement meets exactly as intended at the time of application and it shall remain in compliance the entire time the license is held.

INITIAL	It is understood that a physical inspection will be performed by BMV Investigations shortly after license issuance. If the licensed location fails to meet any of the listed requirements, it will immediately be referred to the Motor Vehicle Dealers Board for possible suspension or revocation of the license.
INITIAL	The proposed established place of business must be separated by a permanent physical barrier from any residence or unrelated business, with the exception of the business operated as a new motor vehicle dealership, a used motor vehicle dealership, or a motor vehicle renting dealership, as defined in section 4549.65 of the R.C., located at the place of business.
INITIAL	The office shall contain no less than 180 square feet of usable interior office area excluding restrooms, storage or utility space, shall be kept neat and orderly at all times, clearly identified and easily accessible.

INITIAL	Upon issuance, the dealer permit and a current list of salespersons shall be posted in a conspicuous place in each place of business pursuant to R.C. 4517.10.
INITIAL	The business hours must be maintained and legibly posted in a conspicuous place near the entrance of the office. The office must be staffed by a person licensed under chapter 4517 of the R.C. during the posted business hours for the entire time the license is held.
INITIAL	A business telephone must be in service at all times and answered in the dealership's name. The business telephone number must be legibly posted in a conspicuous place in public view.
INITIAL	A sign that displays the business name in which the application is made, including any registered trade names, with letters that must be no less than six (6) inches high, be permanent, properly maintained, and prominently displayed by the entrance of the office, if the sign is not visible from the public roadway.
INITIAL	Required at the time of application, the applicant must provide clear photographs via mail or e-mail (JPG format) of the location showing: <ul style="list-style-type: none"> (1) the office (inside and outside) (2) the sign with the business name, including any registered trade names (3) the posted business hours (4) the posted business telephone number

PHOTOS MAY BE SUBMITTED BY MAIL WITH THE APPLICATION OR BY E-MAIL (JPG format) TO dealerphotos@dps.ohio.gov.

Please **DO NOT** submit an application until the following are met:

- **ALL LEASING MOTOR VEHICLE DEALER PHYSICAL REQUIREMENTS**

Fees are non-refundable

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

Leasing license with plate – optional (in state only)

Title Defect Rescission Fund*	\$ 150.00
Permit (Required)	\$ 50.00
Postage	\$ 4.50
SUBTOTAL FEE	\$ 204.50
Master Plate (Optional) \$50.25	\$
**Additional Plate(s) (Optional) \$10.25 x _____	\$
GRAND TOTAL FEE	\$

Leasing license with no plate (out of state)

Title Defect Rescission Fund*	\$ 150.00
Permit	\$ 50.00
GRAND TOTAL FEE	\$ 200.00

*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 (800) 282-0515.

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

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 also affirm that all statements in the foregoing application and in any attached sheets are true and correct and that I, as owner, as a partner, president, member, trustee, or principal owner have the authority to sign this application and to make the statements contained herein and have initialed as required.

PRINTED OR TYPED NAME OF SIGNER	TITLE
SIGNATURE (OWNER, PARTNER, PRESIDENT, MEMBER, TRUSTEE, OR PRINCIPAL OWNER) X	DATE OF APPLICATION

NOTARY

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

(SEAL)

My commission expires _____ **X** _____
SIGNATURE

RETURN THE COMPLETED APPLICATION, PHOTOS, 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 laws visit our Web site at www.ohioautodealers.com.