



DEPARTMENT OF TRANSPORTATION
DRIVER AND MOTOR VEHICLE SERVICES
1905 LANA AVE NE, SALEM OREGON 97314

APPLICATION TO CORRECT DEALER / REBUILDER VEHICLE DEALER CERTIFICATE

DEALER NUMBER

EFFECTIVE DATE

EXPIRATION DATE

CURRENT BUSINESS NAME

1

Check the reason for correction:

- Name Change Address Change Add / Remove Owners Org. / Structure Change

Instructions:

- The fee for a corrected certificate: \$30.
- Name change and/or address change: \$30. Attach Bond Rider and Insurance Certificate.
- Organizational structure change: \$30. (e.g., Individual partnership or LLC to Corp.) Attach a bond rider and insurance certificate.
- Adding/Removing LLC member or corporate officer: **No Fee**
- Each new owner must complete and sign lines 12-16 or 17-21.
- Each owner being removed must sign line 22 or 23.
- One owner must sign line 24.
- Provide copy of valid photo ID if changing residence address.
- Dealer number and expiration date will stay the same.

VALIDATION USE ONLY

Submit the completed application to: DMV Business Licensing, 1905 Lana Ave NE, Salem Oregon 97314.

NOTE: If the dealership has been sold, the new owner(s) must obtain their own vehicle dealer certificate using the Form 735-370 Packet since a dealer certificate is not transferable.

NAME CHANGE

2

NEW BUSINESS NAME (If assumed business name, fill in Registry Number.)

OREGON BUSINESS REGISTRY NUMBER

FEDERAL EMPLOYER IDENTIFICATION NUMBER

Any alteration of Line 3 voids location approval.

ADDRESS CHANGE

3

NEW STREET ADDRESS WHERE BUSINESS WILL BE CONDUCTED

RESIDENCE

PREVIOUS SUPPLEMENTAL

BUSINESS TELEPHONE

()

4

CITY

ZIP CODE

COUNTY

5

RESIDENCE ADDRESS

CITY

ZIP CODE

EMAIL

6

MAILING ADDRESS

CITY

ZIP CODE

7

PREVIOUS STREET ADDRESS OF BUSINESS LOCATION

CITY

ZIP CODE

LOCATION APPROVAL - Required only if dealer is changing business location

Certification of Local Zoning and Business Regulatory Compliance. ORS 822.005 requires a vehicle dealer certificate, unless exempt under ORS 822.015, for any person who:

- (a) Buys, sells, brokers, trades or exchanges vehicles either outright or by means of any conditional sale, bailment, lease, security interest, consignment or otherwise; OR
- (b) Displays a new or used vehicle, trailer or semitrailer; OR
- (c) Acts as any type of agent for the owner of a vehicle to sell the vehicle or acts as any type of agent for a person interested in buying a vehicle to buy a vehicle.

THE CERTIFICATION BELOW IS TO BE COMPLETED BY THE LOCAL ZONING OFFICIAL. The approval below should be based upon whether the jurisdiction allows the applicant **ANY** of the activities in (a) through (c) above under its ordinances, at the location of the business given on Line 3.

As the zoning official for the jurisdiction where this business is located, I verify by my signature below that the location of this business as shown on this application complies with any land use ordinances or business regulatory ordinances of the jurisdiction pursuant to ORS 822.025(6).

8

CITY OF:

COUNTY OF:

TELEPHONE NUMBER

()

9

PRINT NAME

TITLE

10

SIGNATURE

X

DATE

Restrictions on the location approval are in an attached letter from the zoning authority.



Place stamp or seal here



OWNERSHIP CHANGE

Check your organization type on **Line 11**, list all owners and provide other required information below. The dealer certificate number and expiration date will stay the same. If adding names, attach copies of ALL new owners, partners, LLC members or corporate officers' valid government-issued photo ID's (driver license, state issued identification card or passport). Copy must be legible. If the residence address on the photo ID is different than the residence address listed below, submit a statement explaining why the addresses do not match.

11 Individual Partnership LLC Corporation (If corporation, under what state is business incorporated?) _____

ADD NAMES List each person being **added** as a partner, LLC member or corporate officer.

12	PRINT NAME (MUST SIGN LINE 16)			TITLE	
13	DATE OF BIRTH	DRIVER LICENSE NUMBER	STATE OF ISSUE	HOME PHONE NUMBER ()	
14	RESIDENCE ADDRESS		CITY	STATE	ZIP CODE
15	MAILING ADDRESS		CITY	STATE	ZIP CODE
16	CERTIFYING SIGNATURE OF OWNER SHOWN ON LINE 12 ABOVE				DATE

X

17	PRINT NAME (MUST SIGN LINE 21)			TITLE	
18	DATE OF BIRTH	DRIVER LICENSE NUMBER	STATE OF ISSUE	HOME PHONE NUMBER ()	
19	RESIDENCE ADDRESS		CITY	STATE	ZIP CODE
20	MAILING ADDRESS		CITY	STATE	ZIP CODE
21	CERTIFYING SIGNATURE OF OWNER SHOWN ON LINE 17 ABOVE				DATE

X

REMOVE NAMES List each person being **removed** as a partner, LLC member or corporate officer.

22	PRINT NAME	SIGNATURE	TITLE
23	PRINT NAME	SIGNATURE	TITLE

X

X

CERTIFICATION

False certification is a Class B misdemeanor under ORS 162.085, and is punishable by six months in jail, a fine of up to \$2,500 or both. In addition, civil penalties and DMV sanctions against you or your dealer certificate may be imposed. With this in mind:

I CERTIFY I am an owner, partner, LLC member or corporate officer of this dealership and all information on this application is accurate. CERTIFICATION CANNOT BE SIGNED BY PERSON BEING ADDED ON LINES 12 OR 17.

24	CERTIFYING SIGNATURE OF OWNER	TITLE
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X

NEW BUSINESS LOCATION INFORMATION

25 **Property is (check one):** OWNED LEASED / RENTED: LEASE OR RENTAL PERIOD: _____
If property is "Leased / Rented" complete the following:

26	PROPERTY OWNER'S FULL NAME	TELEPHONE NUMBER ()		
27	PROPERTY OWNER'S ADDRESS	CITY	STATE	ZIP CODE

Don't Forget!

- For name change, address change and organizational structure, a bond rider from your bonding company and a new insurance certificate must be submitted.
- One current owner **MUST** sign Line 24. CERTIFICATION CANNOT BE SIGNED BY PERSON BEING ADDED ON LINES 12 OR 17.
- Location approval is required when changing a business location.
- A fee of \$30 is required with the exception of a change of LLC member or Corporate officer which requires no fee.