



STATE OF MICHIGAN
RUTH JOHNSON, SECRETARY OF STATE
DEPARTMENT OF STATE
LANSING

Dear Requester:

You recently requested information regarding the requirements for obtaining a vehicle dealer license in Michigan. In response to your request, we have enclosed the following materials:

1. Instruction Booklet.
2. Uniform Vehicle Dealer Surety Bond form.
3. Zoning Approval Form.
4. Municipality Approval Form.
5. Dealer Selection for Designated Branch Offices.
6. Original Vehicle Dealer License Application.
7. Application for a Michigan Repair Facility Registration. (You may use the Repair Facility Agreement form instead.)
8. Livescan Fingerprint Request.
9. A chart of application requirements for each classification, which is on the back of this letter.

Please read the instruction booklet carefully. Not all classifications are compatible. Select the classification(s), which apply to your intended business operation. A pre-license inspection of the business location will be conducted prior to a license being issued for all Class B and Class W applications. The business address must meet the established place of business requirements (see page 8, item 10 of the instruction booklet).

Please complete the application and related materials carefully and mail them with all required documents and fees to: Michigan Department of State, Bureau of Driver and Vehicle Programs, Business Licensing Section, Lansing, MI 48918. Before mailing your application, please review the checklist on page 5 of the application.

The speed with which we are able to process your application depends almost entirely upon the completeness and accuracy of the application and related materials. You may contact us at 1-888-SOS-MICH (1-888-767-6424) or licensing@michigan.gov if you have any questions regarding the application process. Please be aware that all applications are subject to review and investigation.

Sincerely,

Business Licensing Section
Bureau of Driver and Vehicle Programs

Enclosures
(Rev. 12/2015)

ATTENTION! READ THIS FIRST!

ORIGINAL VEHICLE DEALER LICENSE APPLICATION

INSTRUCTION BOOKLET

**Michigan Department of State
Driver Programs Division
Business Licensing Section
Lansing, MI 48918**

**Telephone:
1-888-SOS-MICH
(1-888-767-6424)**

**Fax:
(517) 335-2810**

**E-Mail:
licensing@michigan.gov**

INSTRUCTION BOOKLET

ORIGINAL VEHICLE DEALER LICENSE APPLICATION

This dealer application packet contains: the dealer license application, a surety bond form, a zoning approval form, municipality approval form, a repair facility registration application, a repair facility agreement form, a dealer selection for designated branch form, and also a Livescan form. For additional copies, contact the Business Licensing Section at 1-888-SOS-MICH (1-888-767-6424), licensing@michigan.gov or visit our website at www.Michigan.gov/sos.

Please Note: The Michigan Vehicle Code [MCL 257.14 et seq.] defines an "established place of business" as the place actually occupied either continuously or at regular periods by a dealer where books and records are kept and a large share of business transacted. The address or location listed on your dealer application cannot be identical to the established place of business or location of another licensed dealer. By statute, the proposed address or location can only be the established place of business of **1 licensed vehicle dealer**.

FINGERPRINTS

Each individual listed in Item 8 on the application must be fingerprinted. Fingerprints are taken by appointment only. To schedule an appointment you must:

- a. Visit www.michigan.gov/msp
- b. Click on the "Criminal History Records" tab on the right.
- c. Click on "For employment/licensing" and follow the instructions

Take the *Live Scan Fingerprint Request* included in this packet to that appointment.

All fees associated with fingerprinting will be collected by the printing agency. They will provide you with a signed receipt as proof of fingerprinting. Please include a copy of that signed receipt when you submit your *Original Vehicle Dealer License Application*.

SALES TAX NUMBER

Most Michigan businesses are required to have a sales tax number. To see if the license classification(s) you are applying for requires a sales tax license, please contact the Michigan Department of Treasury at: Michigan Department of Treasury,

Registration Division, Lansing, MI 48922 or call (517) 636-4660.

SURETY BOND (Classes A, B, and D only)

NOTICE: An original surety bond must be submitted and be completed correctly. Please carefully follow the instructions on the back of the Uniform Vehicle Dealer Surety Bond form.

The **exact** business name and address of the dealership must appear on the face of the bond as it appears on the dealer license application form.

Individual owners and partners **must** be listed in addition to the business name and address (i.e. John Doe dba John's Used Cars, or John Doe and Sally Doe dba John's Used Cars).

Corporate officers, etc., do not need to be listed for a corporation, and members do not need to be listed for a limited liability company. **Only** the corporate name or the name of the limited liability company (including d/b/a or assumed name, if any) and the business address need to appear on the bond.

The **bond number** must appear on the face of the bond. The **surety's name** must be listed on the face of the bond.

Signatures are required for:

- a. Attorney-in-Fact for the Surety;
- b. Witness to the Attorney-in-Fact for the Surety;
- c. Principal (dealer license applicant); and
- d. Witness to Principal.

A **power of attorney** for the Attorney-in-Fact must accompany the bond OR must be on file with the Michigan Department of State, Business Licensing Section, Lansing, MI 48918-1210. Again, the **original** bond must be submitted to the State of Michigan. A photocopy or fax copy is unacceptable, and a dealer license will not be issued.

ZONING

Approval for applicable zoning and municipal requirements must be obtained for the dealership address of all vehicle dealer license classifications.

The enclosed zoning and municipal approval forms must be completed by the local zoning/municipality authority and returned with the application materials within 90 days of signature. In Detroit, contact the Department of Buildings

and Safety Engineering, Zoning Division, 4th floor, City-County Building.

The item numbers below match the item numbers on the application.

1. BUSINESS NAME

Enter the exact name of the business. The name must match the business name on all documents presented with the application, including the surety bond, the insurance certificate, the assumed name filing, the articles of incorporation, etc.

2. BUSINESS LOCATION

Enter the **complete** business address. A Rural Route or Post Office Box alone will not be accepted. The physical location must be identified. The address must match the address on all documents presented with the application (see document list in Item 1 above).

3. BUSINESS TELEPHONE

List the area code and telephone number of your business, and your fax number, and e-mail address.

4. BUSINESS TYPE

Check the appropriate box, and follow the instructions below:

Individual Owner or Partnership: Enclose a copy of the Assumed Name Filing from the County Clerk for the county in which the business is located.

Corporation or Limited Liability Company: Enclose a copy of the articles of incorporation, articles of organization, or certificate of good standing from the Michigan Department of Consumer and Industry Services. Businesses formed in other states must obtain a certificate of authority from the Michigan Department of Consumer and Industry Services before applying for a Michigan dealer license. Telephone (517) 241-6470 for further information.

Note: Unincorporated trusts cannot be licensed as a dealer in Michigan. Only the business types listed may be issued a dealer license.

5. LICENSE CLASSIFICATIONS

Indicate the license classification(s) for which you are applying.

A dealer license may be issued in one or more classifications (classes), depending on the business activity performed.

The law requires different things from different classes of dealers. Sometimes the requirements will not allow one type of dealer to do something another type of dealer would be permitted to do. Because of this, not all license classes are "compatible" with each other. The following descriptions tell you in general what activities each class allows and which classes are compatible.

Class A (New Vehicle Dealer)

This dealer buys and sells new vehicles under a franchise agreement or a contract with a new vehicle manufacturer.

Class A is compatible with B, C or R, and E classes.

Class B (Used Vehicle Dealer)

This dealer buys and sells used vehicles.

Class B is compatible with A, C or R, and E.

Class C (Used Vehicle Parts Dealer) and Class R (Automotive Recycler)

These dealers buy or otherwise acquire late model major component parts for resale, either at wholesale or at retail, and/or acquire vehicles to dismantle for the resale of their parts, selling the remains as scrap. These are the only classes which can legally buy late model distressed vehicles (salvage or scrap vehicles) or late model major component parts from insurance companies, or through auctions, brokers, or salvage pools in Michigan.

Note: A Class C or Class R dealer may only be represented at an auction, broker, or salvage pool by its own **Licensed Salvage Vehicle Agent**. Contact the Licensing Unit to obtain a Salvage Vehicle Agent application.

Class C and Class R are compatible with A, B, and E; or E and F. Class C

and Class R are NOT COMPATIBLE with each other or with Class D or Class G.

Class D (Broker)

This dealer "brokers" the sale of vehicles or late model major component (salvageable) parts by arranging (or offering to arrange) for the sale of the vehicles or parts between two parties. A broker **may not** take ownership of the vehicles or major component parts. Examples of brokers are new car brokers, vehicle sales listing agencies, consignment lots, flea markets, auctions, and salvage pools.

Brokers cannot buy vehicles at auctions.

Class D is compatible only with Class G.

Class E (Distressed Vehicle Transporter)

This dealer may: 1) buy or acquire ownership of, 2) transport, and 3) sell scrapped or junked vehicles only. Vehicles may be sold at wholesale only to:

1. Used Vehicle Parts Dealers (Class C); or
2. Scrap Metal Processors (Class F); or
3. Automotive Recyclers (Class R).

This dealer may NOT dismantle vehicles or sell parts.

Note: A vehicle "crusher" is one type of distressed vehicle transporter.

Class E is compatible with A, B, and/or C; or C and/or F; or A, B, and/or R; or R and/or F.

Class F (Vehicle Scrap Metal Processor)

This dealer processes vehicles into scrap metal by shearing, fragmenting, baling, shredding, etc. (Crushing vehicles is not considered a scrap metal process since it is not the final step before remelting.)

A scrap metal processor who acquires vehicles only from licensed dealers is not required to be licensed but must keep certain records and make them

available for inspection.

Class F is compatible with C and/or E; or E and/or R.

Class G (Vehicle Salvage Pool)

This dealer engages in the business of storing and displaying damaged or distressed vehicles for insurance companies.

Class G is compatible only with Class D.

Class W (Wholesaler)

This dealer engages in the business of selling used vehicles to or purchasing used vehicles from a licensed motor vehicle dealer and who does not sell or offer for sale motor vehicles of any classification to a person other than a licensed vehicle dealer.

A wholesaler shall not advertise vehicles for sale on the internet or any classified listing unless the advertisement clearly discloses the wholesaler's license classification and clearly states that any purchaser shall be a licensed vehicle dealer.

A wholesaler shall buy or sell not less than 24 vehicles in this state each year to retain possession of a wholesaler license.

Class W is compatible with a used or secondhand vehicle parts dealer (C) or automotive recycler (R).

6. CONTRACT OR FRANCHISE AGREEMENT (Class A only)

List the makes of new vehicles for which you have franchises or agreements to sell.

Enclose a copy of franchise agreement, letter of intent, or a certification that you hold a contract to act as a factory representative, factory distributor, or distributor representative to sell at retail the make(s) of vehicle(s) you listed. Make sure these documents include the name and address of the manufacturer and the dealer.

NOTE: Conversion companies are not the same as manufacturers. If you

have questions about the agreement you have, contact the Business Licensing Section at 1-888-SOS-MICH (1-888-767-6424).

7. BUSINESS DAYS AND HOURS

List the specific days and hours the business will be open. Class A and Class B dealers are required to maintain a minimum of 30 business hours per week.

All other dealer classes must maintain at least 4 consecutive business hours on file with the Secretary of State.

If you change your business hours, you must notify the Business Licensing Section, in writing or by fax at (517) 335-2810.

8. OWNERS, PARTNERS, CORPORATE OFFICERS, DIRECTORS

List the full name, home address, social security number and birthdate for all owners, partners, corporate officers, members and directors.

For corporations, “owners” also includes any stockholder holding 25% or more of the stock issued.

Limited Liability Companies must include information for all managers.

If the owner, partner or manager listed on the application form is a corporation, partnership or limited liability company, the individuals who are the owners, partners, corporate officers, directors, managers, or stockholders or members holding 25% or more of the stock issued for the company listed in Item 8 must be disclosed. Use a separate sheet to provide the full name, home address, home telephone and birthdate for each individual.

Each individual listed in Item 8 must have fingerprints on file with this department. Individuals disclosed under a corporation, partnership or limited liability company listed as a licensee who will have direct impact on the operation of the business must also have fingerprints on file. Please refer to the instructions for completing fingerprint cards for more details.

9. SERVICING FACILITY REQUIREMENT

Class A and Class B vehicle dealers are required to provide proper servicing facilities. Used vehicle parts dealers and recyclers are required to provide proper servicing facilities if they are installing parts. Used vehicle parts dealers and automotive recycler business holding a new or used vehicle dealer license must have a registered motor vehicle repair facility or enter an agreement with a registered repair facility.

The servicing facility must be located within 10 miles of the dealership's established place of business. **This requirement also applies if vehicles are sold "AS IS" or wholesale.**

This requirement may be met in one of two ways:

1. Register as a motor vehicle repair facility. A Motor Vehicle Repair Facility Registration Application is enclosed. It is not necessary to register again if the business is currently registered and the ownership has not changed.
2. Enter into an agreement with a currently registered motor vehicle repair facility.

An agreement form is enclosed. Make sure the agreement shows the repair facility registration number, the repair facility is not expired and a signature from an **owner/officer** on file.

10. BUSINESS LOCATION DESCRIPTION

Check the appropriate box.

The Michigan Vehicle Code [MCL 257.14] defines an "established place of business" as the place actually occupied either continuously or at regular periods by a dealer where books and records are kept and a large share of business transacted. Dealerships cannot share or pool resources to meet established place of business requirements. Each dealership must separately meet the requirements.

A pre-licensing inspection of the business location will be conducted for class A (upon request), Class B and Class W applicants prior to a license being issued. The business address must meet the established place of business requirements. A dealer's established place of business must meet all applicable zoning and municipal requirements.

Businesses applying for a vehicle dealer license at the same address or

location as another vehicle dealer must provide evidence (e.g. photos, images, drawings etc.) clearly reflecting each business is not occupying the same established place of business. Modifications to the address such as suite numbers or other distinguishing characters such as A, B, ½, etc. can be submitted as verification the applicant does not share a location with another dealer.

As a reminder, businesses cannot share or pool resources to meet established place of business requirements. Each business must separately meet the requirements.

The Business Licensing Section will evaluate each original dealer license application submission where it appears more than one dealer may be occupying the same address or location on a case-by-case basis.

For a Class A and Class B dealer, an established place of business must include the following:

- The premises must contain a permanently enclosed building or structure either owned, leased, or rented by a dealer, which is not a residence, tent, temporary stand, or any temporary quarters;
- The building or structure is required to be continuously occupied in good faith for the purpose of selling, buying, trading, leasing, or otherwise dealing in motor vehicles;
- All books, records, and files necessary to conduct the business of a Class A or class B dealer must be maintained in the building or structure;
- A building or structure housing an office of at least 150 square feet in size, equipped with standard office furniture, working utilities, a working restroom, and a working telephone listed in the name of the business on the dealer's license;
- Land space of no less than 1,300 square feet to accommodate the display of a minimum of 10 vehicles of the kind and type that the dealer is licensed to sell and an additional 650 square feet for customer parking. The display and customer parking areas must be adequately surfaced and well lit during business hours;
- An exterior sign displaying the name of the dealership that is permanently affixed to the building or land with letters clearly visible from a highway identifies the premises;
- Conspicuous posting of the dealer's regular hours of operation. The posted hours must be not less than 30 hours per week;

- The premises must contain a registered repair facility on site for the repair and servicing of motor vehicles of a type sold at the established place of business, unless the dealer has entered into a written servicing agreement with a registered repair facility at a location not to exceed 10 miles' distance from the established place of business. If repairs are conducted pursuant to a servicing agreement, the servicing agreement must be conspicuously posted in the office;

A dealer may not combine space and resources with another dealer to meet the minimum established place of business requirements for a new or used vehicle dealer. Each licensed new or used dealer must meet the established place of business requirements separately.

For a Class W dealer, an established place of business must include the following:

The premises shall contain a permanently enclosed building or structure that is either owned, leased, or rented by a wholesaler, which is not a commercial mailbox, tent, temporary stand, or other temporary quarters.

All books, records, and files necessary to conduct the business of the wholesaler shall be maintained in the building or structure described in the above paragraph.

The premises shall not be used for the display of vehicles. However, the premises may be used for the storage of vehicles purchased by the wholesaler prior to sale to a licensed vehicle dealer.

The premises shall be identified by an exterior sign displaying the name of the wholesaler that is permanently affixed to the building or land with letters clearly visible from the roadway.

For other dealer classes an established place of business means the place actually occupied either continuously or at regular periods where books and records are kept and a large share of business is transacted.

Estimate the greatest number of vehicles you will have in inventory at one time.

11. DEALER PLATES AND FLEET INSURANCE (Class A, B, W only)

You must have 20/40/10 fleet-type Michigan no-fault insurance indicating coverage for **“ANY VEHICLE”** or **“ALL OWNED VEHICLES.”**

Enclose a copy of your fleet insurance certificate. Your insurance certificate must have the exact business name as listed in Item 1. **If the insurance certificate does not indicate ANY VEHICLE or ALL OWNED VEHICLES, the application cannot be processed.**

Class A and Class B dealers are required by law to purchase a minimum of two dealer plates.

There is no minimum dealer plate purchase requirement for a Class W dealer.

Class A and Class B dealers may apply for additional plates according to the following formula:

ONE plate for each five vehicles carried in highest inventory, up to and including 400 vehicles. ONE plate for each seven vehicles in excess of 400, up to a maximum of 100 plates.

A newly licensed Class W dealer is initially issued 1 dealer plate. Based upon proof of inventory, a Class W dealer may apply for any additional dealer plate(s) according to the following formula:

One plate for each five vehicles carried in highest inventory, up to and including 40 vehicles. One plate for each 10 vehicles in excess of 40, up to a maximum of 40 plates.

12. FEES

Calculate the fees based on the information provided on the application form. Make check or money order payable to **State of Michigan**.

13. WORKERS' COMPENSATION INSURANCE (Classes C and R only)

Other dealers may also need Workers' Compensation Insurance; however, the Michigan Vehicle Code requires used or secondhand vehicle parts dealers and automotive recyclers to provide evidence of workers' compensation insurance for employees classified as automobile dismantlers.

To determine your eligibility for a Notice of Exclusion, contact the Michigan Department of Consumer and Industry Services at (517) 284-8922.

14. APPLICANT HISTORY

Complete for each applicant listed in Item 8 following the instructions provided on the application form. Use separate sheets as necessary.

- A. Check the appropriate box. List the name of any applicant who has had a vehicle dealer license refused or revoked. Provide a detailed explanation.
- B. Check the appropriate box. List the name of any applicant who is related by birth or marriage to any dealer. List the name of any applicant who is or was employed by, or is or was an agent for, any dealer within the past five (5) years. List the name of the dealer and, if known, the dealer license number.
- C. Check the appropriate box. If the answer is YES, include a detailed explanation, including the alleged offense, the police department, the court of jurisdiction and, if known, the case number. Do not include traffic offenses.
- D. Each applicant must complete a work history for the past five (5) years.

15. SIGNATURES AND CERTIFICATIONS

Each applicant listed in Item 8 must sign the certifications.

This application is a legal document. **Please read each certification before signing.** Providing false information is a felony.

ORIGINAL VEHICLE DEALER LICENSE APPLICATION

DEPARTMENT USE ONLY

License Number	
Approved by	Date
Regular Plates THRU	
Cycle Plates THRU	

READ THE INSTRUCTION BOOKLET BEFORE COMPLETING THIS FORM

1. **BUSINESS NAME** (Include any assumed names or corporation names)

2. **BUSINESS LOCATION** - NOTE: RR or PO Box numbers alone will not be accepted. The actual location must be identified.
(Street) (City) (County) (Zip)

3. **BUSINESS CONTACT INFORMATION**

Telephone () Fax () EMail Address:

4. **BUSINESS TYPE** (Check only one)

☐ Individual Owner (one person or husband and wife) ☐ Partnership (two or more persons or husband and wife) ☐ Corporation ☐ Limited Liability Company

5. **LICENSE CLASSIFICATIONS** (Check appropriate box or boxes)

☐ CLASS A - New Vehicle Dealer ☐ CLASS F - Vehicle Scrap Metal Processor
Type of scrap processing: _____
☐ CLASS B - Used Vehicle Dealer
☐ CLASS C - Used Vehicle Parts Dealer ☐ CLASS G - Vehicle Salvage Pool
☐ CLASS D - Broker (Not compatible with Classes A or B) ☐ CLASS R - Automotive Recycler
☐ CLASS E - Distressed Vehicle Transporter ☐ CLASS W - Wholesaler

6. **CONTRACT OR FRANCHISE AGREEMENT** (Class A only)

7. **BUSINESS DAYS AND HOURS** (Class A & B dealers require a minimum of 30 hours of operation per week, all other classes require at least 4 consecutive hours per week)

8. **OWNERS, PARTNERS, CORPORATE OFFICERS, AND DIRECTORS**

FULL NAME	HOME ADDRESS (Street)	(City/State/Zip)	Social Security Number	BIRTHDATE
FULL NAME	HOME ADDRESS (Street)	(City/State/Zip)	Social Security Number	BIRTHDATE
FULL NAME	HOME ADDRESS (Street)	(City/State/Zip)	Social Security Number	BIRTHDATE
FULL NAME	HOME ADDRESS (Street)	(City/State/Zip)	Social Security Number	BIRTHDATE

9. **SERVICING FACILITY REQUIREMENT** (Class A and B only)

- ☐ A completed Motor Vehicle Repair Facility Registration Application is enclosed.
- ☐ This business is currently a registered repair facility. REGISTRATION NUMBER: _____.
- ☐ This business has an agreement with a registered repair facility, a copy of which is enclosed. The servicing facility must be located within 10 miles of the dealership's established place of business.

10. **BUSINESS LOCATION DESCRIPTION**

If YES, give dealer number and name:

Is this business location presently occupied by another licensed vehicle dealer?

☐ NO ☐ YES

11. **DEALER PLATES AND FLEET INSURANCE** (Class A , B and W only)

Greatest number of vehicles you expect to have on hand at one time:

Number of REGULAR DEALER PLATES requested: _____

Number of MOTORCYCLE DEALER PLATES requested: _____

Total number of all DEALER PLATES requested: _____

Attach a copy of your fleet insurance certificate. See Instruction Booklet, Item 11

12. **FEES**

- A. License fee - All classes except C and R \$75.00 (\$37.50 from July 1 to December 31) \$ _____ OR
- B. License fee - Class C and Class R \$160.00 (\$80.00 from July 1 to December 31) \$ _____
- C. Dealer plate fees (Only Class A, B, W are eligible) \$10.00 for each plate \$ _____
(Class A & Class B require a minimum of 2 plates)
- D. TOTAL FEES (A or B plus C) \$ _____

13. **WORKERS' COMPENSATION INSURANCE** (Class C and R only)

Check the appropriate box:

INDIVIDUAL OWNERSHIP:

- ☐ I/we are not required to have workers' compensation insurance

PARTNERSHIP, CORPORATION OR LLC:

- ☐ Attached is form WC-337, Notice of Exclusion.
(To determine your eligibility for a form WC-337, contact the Department of Insurance and Financial Services at 517- 284-8922)

- ☐ Attached is a copy of a workers' compensation insurance certificate.

14. APPLICANT HISTORY

A. Have any of the applicants listed in Item 8 been refused the issuance of a vehicle dealer, vehicle wholesaler, salvage dealer, salvage vehicle agent, or broker license or had a vehicle dealer, vehicle wholesaler, salvage dealer, salvage vehicle agent, or broker license revoked or suspended in Michigan or any other state?

☐ NO ☐ YES If YES, give the name(s) of the applicant(s) involved and complete details on a separate sheet.

B. Is any applicant listed in Item 8 related by birth or marriage to any currently or previously licensed Michigan vehicle dealer, vehicle wholesaler, broker, or salvage vehicle agent or was any applicant listed in Item 8 employed by or an agent for any dealer in Michigan or any other state within the past 5 years?

☐ NO ☐ YES If YES, give the name(s) of the applicant(s) and complete details on a separate sheet. Include dealer license number(s), if known.

C. Have any of the applicants listed in Item 8 been arrested or convicted of a crime other than traffic violations within the past ten years?

☐ NO ☐ YES If YES, give the name(s) of the applicant(s) and complete details on a separate sheet. Include the arresting police agency, court of jurisdiction, and case number, if known.

D. For each applicant listed in Item 8, list names, addresses, and telephone numbers of employers **for the past 5 years** other than the dealers listed above. Also, include the job title and dates of employment for each applicant. If an applicant was self-employed, list names and addresses of businesses and type of business. If unemployed, list name, "UNEMPLOYED", and dates of unemployment. Use a separate sheet, if necessary.

APPLICANT #1:		EMPLOYER NAME	
EMPLOYER ADDRESS		EMPLOYER TELEPHONE	
JOB TITLE		DATES EMPLOYED	
		FROM	TO
APPLICANT #2:		EMPLOYER NAME	
EMPLOYER ADDRESS		EMPLOYER TELEPHONE	
JOB TITLE		DATES EMPLOYED	
		FROM	TO
APPLICANT #3:		EMPLOYER NAME	
EMPLOYER ADDRESS		EMPLOYER TELEPHONE	
JOB TITLE		DATES EMPLOYED	
		FROM	TO
APPLICANT #4:		EMPLOYER NAME	
EMPLOYER ADDRESS		EMPLOYER TELEPHONE	
JOB TITLE		DATES EMPLOYED	
		FROM	TO

15. SIGNATURES AND CERTIFICATIONS (Each applicant listed for Item 8 must sign)

CAUTION: ANY MISLEADING, INCOMPLETE, OR FALSE STATEMENT MAY BE GROUNDS FOR DENIAL OF THIS APPLICATION OR SUSPENSION OR REVOCATION OF ANY LICENSE ISSUED.

I/we hereby certify that the persons named in this application have read: Chapter 2 of the Michigan Vehicle Code, other applicable laws that pertain to my/our dealer license and the department's Dealer Manual (available at Michigan.gov/sos) and understand the requirements of the license type that I/we are applying for.

I/we hereby certify that the business named in this application maintains, and will maintain once a license is issued, an established place of business as required by MCL 257.14.

I/we hereby certify that the business named in this application will maintain records only at the established place of business and will provide the records for inspection upon request by an agent of the Secretary of State or law enforcement.

I/we hereby certify that the business named in this application maintains, and will maintain once a license is issued, records as required by law and/or prescribed by the Secretary of State, which may include a police book, temporary registration log, vehicle parts purchase and sales records.

I/we hereby certify that the persons named in this application, if maintaining an electronic police book, will ensure that a paper copy is available upon request by an agent of the Secretary of State or law enforcement.

I/we hereby certify that the persons named in this application will take the necessary precautions to ensure the protection of the required records from fire, water damage or malfeasance.

I/we understand that the Secretary of State is not responsible for the validity of documents that I/we complete and file with the Secretary of State. I/we further understand that I/we are responsible for any false information, errors or omissions in regards to documents presented to the Secretary of State for processing.

I/we understand that dealer training is not required but is highly encouraged to gain a better understanding of the requirements of my/our dealer license.

I/we hereby certify that the persons named in this application are not acting as the alter ego, in the place of, or on behalf of, any other person or persons in seeking this license.

If granted a license I/we hereby certify that the persons named in this application will not sublet the dealer license to other persons and/or allow unlicensed individuals to use the license to conduct their own business/transactions. I/we understand that I/we are fully responsible for all transactions conducted with my/our dealer license number. I/we will take the necessary measures to prevent the unauthorized use of my/our dealer license number including properly completing all paperwork, forms, police book entries, temporary registration log entries, inspection of auction sales and inventory control records.

I/we hereby grant the licensing authority in any state or jurisdiction listed in this application authority to release information concerning any previous license applications, licensing history, and disciplinary actions or sanctions to the Secretary of State or his/her agents.

I/we hereby grant any employers named in this application authority to release information concerning my/our employment history to the Secretary of State or his/her agents.

I/we authorize the Secretary of State to receive and review the criminal history of the individuals listed in item 8 from the Michigan State Police and the FBI via Livescan.

I/we stipulate and agree that any legal process affecting this business served on the Secretary of State or his/her agents shall have the same effect as if personally served on me/us. I/we agree that this appointment shall remain in force as long as any liability of this business remains outstanding within the State of Michigan.

If granted a Class A or Class B or Class W vehicle dealer license, I/we certify that I/we have and will maintain security for payment of benefits under personal protection insurance, property protection insurance, and residual liability insurance as required by Public Act 294 of 1972 (no-fault insurance) for as long as this license is in effect.

If granted a Class A, Class B, or Class D vehicle dealer license, I/we certify that I/we have and shall maintain a surety bond in the amount of \$10,000 (ten thousand dollars) for as long as this license is in effect.

I/we, the applicants named herein, hereby certify that the statements contained in this application are true to the best of my/our knowledge and belief. Signatures are required below.

Printed Name	Signature	Title	Date
Printed Name	Signature	Title	Date
Printed Name	Signature	Title	Date
Printed Name	Signature	Title	Date

APPLICATION CHECKLIST:

Be sure to include the following items, if applicable:

- ☐ A completed zoning approval form for all license classifications being applied for.
- ☐ A completed municipality approval form for all license classifications being applied for.
- ☐ A completed Dealer Selection for Designated Branches Form for Class A and Class B dealer applicants.
- ☐ A copy of the business creation document or assumed name filing as specified in Item 4 of the instruction booklet.
- ☐ One copy of the signed receipt as proof of fingerprinting for each applicant as specified in the instruction booklet.
- ☐ Franchise agreement(s) for Class A dealers.
- ☐ A certificate of insurance for workers' compensation insurance or a notice of exclusion form (Class C and Class R dealers only).
- ☐ A repair facility registration application or an agreement with a registered repair facility for Class A and Class B dealer applicants.
- ☐ A certificate of insurance for fleet-type Michigan no-fault insurance for Class A, Class B and Class W dealer applicants.
- ☐ A check or money order payable to STATE OF MICHIGAN for the license and plate fees.
- ☐ A completed vehicle dealer surety bond for Class A, Class B, and Class D dealer applicants. Instructions for completing the bond are located on the back of the bond form.

PLEASE NOTE:

Not submitting the required checklist items or not fully completing the application will delay the processing of your license application.

Allow 30 days from receipt of completed application for processing.

ORIGINAL VEHICLE DEALER APPLICATION REQUIREMENTS CHART

ALL CLASSES NEED THE FOLLOWING:

Original application	License Fee	Assumed Name and/or Corporate Filing	Fingerprints
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Class Code	Copy of Franchise or Affidavit	Repair Facility Registration or Service Agreement	Municipality Approval	Zoning Approval	Fleet Insurance Certificate	Dealer Plates	License Fee	Workers Compensation Insurance	\$10,000 Vehicle Dealer Surety Bond	Designated Branch Office Form	Pre-License Inspection
CLASS A	√	√	√	√	√	√ Minimum 2	\$75	N/A	√	√	Upon Request
CLASS B	N/A	√	√	√	√	√	\$75	N/A	√	√	√
CLASS C	N/A	Required only if parts installed	√	√	N/A	N/A	\$160	√	N/A	N/A	N/A
CLASS D	N/A	N/A	√	√	N/A	N/A	\$75	N/A	√	N/A	N/A
CLASS E	N/A	N/A	√	√	N/A	N/A	\$75	N/A	N/A	N/A	N/A
CLASS F	N/A	N/A	√	√	N/A	N/A	\$75	N/A	N/A	N/A	N/A
CLASS G	N/A	N/A	√	√	N/A	N/A	\$75	N/A	N/A	N/A	N/A
CLASS H	N/A	N/A	N/A	N/A	N/A	N/A	\$160	√	N/A	N/A	N/A
CLASS R	N/A	Required only if parts installed	√	√	N/A	N/A	\$160	√	N/A	N/A	N/A
CLASS W	N/A	N/A	√	√	Only if dealer plates are requested	Available	\$75	N/A	N/A	N/A	√

ALL DEALER LICENSES EXPIRE ON DECEMBER 31st OF EACH YEAR

Michigan Department of State - Dealer Selection for Designated Branch Offices

(Please complete all sections of this form)

Business Name		Dealer License No.
Business Street Address		City
Business Email Address		Date
Owner/Officer's Signature X	Owner/Officer's Printed Name	Title

List below up to a maximum 3 branch offices where you will submit dealer transactions.
Enter the branch designated to purchase BFS-4 15-day temporary registrations as your first choice.

1st Branch BFS-4 Temporary Registration Purchases	Branch Number	Branch Name	
	Street Address		City
2nd Branch	Branch Number	Branch Name	
	Street Address		City
3rd Branch	Branch Number	Branch Name	
	Street Address		City

Return to: Michigan Dept. of State, Business Licensing Section (email as an attachment to licensing@michigan.gov).
If you do not have access to email, please fax to 517-335-2810.

IMPORTANT INFORMATION

KEEP FOR FUTURE REFERENCE

Dear Applicant:

Before performing motor vehicle repairs for compensation, a repair facility must register with the Michigan Department of State. Business cannot be conducted until a registration number is issued. Failure to comply with this requirement is grounds for denial of the application. Listed below is a summary of other requirements which will apply after the registration number is issued. The Repair Facility Manual is available online at www.Michigan.gov/sos under "Automotive-related Businesses", "Forms and Publications". Please refer to this manual for a detailed explanation of these requirements.

CONSUMER INFORMATION SIGN - A repair facility must display a sign in the cashier's area, and in each location where customer service orders are written, informing customers of their basic rights under the law.

WRITTEN ESTIMATE - A repair facility must give a written estimate to the customer prior to repair work costing \$20 or more. Any additional repairs which exceed the estimated price by more than \$10 or 10% (whichever is less) must be approved by the customer before the additional work is done. This approval may be oral.

If the customer does not want a written estimate, the facility may have the customer sign a waiver giving up the right to receive the written estimate prior to repairs. One copy of the signed waiver must be given to the customer.

PARTS RETURN - Before beginning work on a customer's vehicle, a facility must inform the customer of the right to return of replaced parts. This can be done by means of a sign or by having proper wording on the face of the work order.

INVOICE - Upon completion of repairs, a repair facility must give the customer an invoice itemizing all parts and labor involved in the repair of the customer's vehicle. The invoice must disclose whether parts installed were new, used, rebuilt, or reconditioned. The name and Michigan certification number of the mechanic who performed the repairs must appear on the invoice. The invoice must contain a certification stating that the repairs were completed properly and must be signed by the owner or a person designated by the owner to represent the facility.

MECHANIC CERTIFICATION - If a repair facility performs major repairs, it must employ State of Michigan certified mechanics for the categories of major repair performed by the facility.

RECORDS MAINTENANCE - A facility must keep for a period of 5 years copies of all documents used by the facility in connection with repairs to customer vehicles. Body shops must keep parts sales records and/or a police book to record major component parts which are bought, sold, or used by the facility.

REGISTRATION NUMBER - The registration number assigned by the Department of State must appear on all written estimates, waiver of estimates, final invoices, or any other documents given to the customer. A repair facility may not do business until a registration number is issued.

If you would like a response to any questions you may have, please contact the Department of State at 1-888-SOS-MICH (1-888-767-6424). You may also be able to find the information on our website, www.Michigan.gov/sos under "Automotive-related Businesses".

Sincerely,

Michigan Department of State

<p>ALLOW AT LEAST 30 DAYS FOR PROCESSING</p>

REPAIR FACILITY REGISTRATION APPLICATION WORKSHEET

Item 14 "Fee Schedule" requires you to anticipate what your gross annual revenue will be for the first twelve months of business. This must be done to determine the appropriate registration fee to submit with your application.

This worksheet should provide you with a reasonably accurate picture of what your gross annual revenue will need to be to cover anticipated expenses and provide a profit.

Following are a number of questions which should help you to estimate your gross annual revenue.

In the blank spaces provided on lines 1 through 12, enter the amount of expense you anticipate. On line 13, enter the amount of profit you expect to earn. Total lines 1 through 13 and enter this amount on line 14. Multiply the amount shown on line 14 by 12 and enter on line 15.

1. Estimated payroll including owner-manager's salary per month. \$ _____
2. Estimated business location mortgage/rent payment per month. \$ _____
3. Estimated utility and telephone costs per month. \$ _____
4. Estimated equipment and tool purchase or rental per month. \$ _____
5. Estimated property, income, social security, and sales tax per month. \$ _____
6. Estimated insurance payment per month. \$ _____
7. Estimated interest payments on loans per month. \$ _____
8. Estimated franchise fee payment per month. \$ _____
9. Estimated cost of parts and supplies per month (refer to repair facility application Item 13 explanation). \$ _____
10. Estimated professional service cost per month (i.e., accountant, attorney, bookkeeper, etc.). \$ _____
11. Estimated cost of maintenance on equipment, tools, and building per month. \$ _____
12. Estimated miscellaneous expenses per month. \$ _____
13. Estimated profit anticipated per month. \$ _____
14. Total lines 1 through 13. \$ _____
15. Multiply the amount shown on line 14 by 12.
This is your anticipated gross annual revenue. \$ _____

THIS WORKSHEET IS FOR YOUR USE—DETACH BEFORE MAILING APPLICATION

ALLOW AT LEAST 30
DAYS FOR PROCESSING

FOR DEPARTMENT USE ONLY

REPAIR FACILITY NUMBER

APPROVED BY

DATE

MOTOR VEHICLE REPAIR FACILITY REGISTRATION APPLICATION

PLEASE TYPE OR PRINT

1. NAME - Enter the name of the corporation or other legal entity, if it is different than facility name.

2. FACILITY NAME - Enter the exact name used by the business at the location being registered.

3. NAME OF INDIVIDUAL IN CHARGE OF THIS LOCATION.

4. BUSINESS E-MAIL ADDRESS

5. FACILITY ADDRESS - Where business will be conducted. Submit a separate application for each location.
(street) (city) (county) (state) (zip)

6. BUSINESS DAYS AND HOURS - Enter the days and hours the business will be open.

7. FACILITY TELEPHONE NUMBER
()

8. CATEGORY - Mark the one most appropriate description of your facility.

A. ☐ New Car Dealer

H. ☐ Auto Parts Shop

Z. ☐ Mobile Repair Facility or

B. ☐ Used Car Dealer

I. ☐ Specialty Shop

Other (specify) _____

C. ☐ Junk Dealer

J. ☐ Part of a Multi-Facility Chain

D. ☐ Truck Dealer

K. ☐ Independent Garage

E. ☐ Motor Home Dealer

L. ☐ Gasoline Service Station

F. ☐ Motorcycle Dealer

M. ☐ Diagnostic Clinic

G. ☐ Mobile Home Dealer

N. ☐ Body or Collision Shop

9. OWNERSHIP TYPE ☐ Trust ☐ Limited Liability Company
☐ Individual Owner ☐ Partnership ☐ Corporation ☐ Other

10. ORIGATION DATE

11. STATE OF ORIGATION

12. ANTICIPATED DATE BUSINESS WILL OPEN. (Business cannot open until a registration number is issued. Allow at least 30 days for processing.)

13. NUMBER OF MECHANICS - Enter the number of persons who diagnose, repair, or maintain motor vehicles.
This includes even persons who do lubrication work, tire installation, and body and collision repairs.

14. FEE SCHEDULE - Gross annual revenue is the total amount of money you expect to receive in payment for services or repairs provided before expenses of any kind are subtracted. Use the attached worksheet to estimate your gross annual revenue.

INCLUDE:

- all parts, labor, and materials you expect to use in performing repairs.
- item such as tires, oil, oil filters, windshield wiper blades, body sheet metal components, batteries, belts, etc.
- labor, even if parts are not used.
- repairs covered by a warranty which reimburses you for parts used and/or labor.

DO NOT INCLUDE:

- parts sold but not installed.
- fuel and lubricants sold over the counter.
- revenue obtained from vehicles not required to be registered and titled such as farm tractors, off road construction equipment, snowmobiles, etc.

When you have found the revenue category which most accurately reflects your anticipated gross annual revenue, place a check in the box next to the fee to be paid. Please be aware that any misleading, incomplete, or false information provided may be grounds for denial of this application.

GROSS ANNUAL REVENUE	FEE	GROSS ANNUAL REVENUE	FEE	GROSS ANNUAL REVENUE	FEE
A. <input type="checkbox"/> Under \$5,000	\$25.00	H. <input type="checkbox"/> \$100,001 to \$120,000	\$200.00	O. <input type="checkbox"/> \$240,001 to \$260,000	\$375.00
B. <input type="checkbox"/> \$5,001 to \$15,000	\$50.00	I. <input type="checkbox"/> \$120,001 to \$140,000	\$225.00	P. <input type="checkbox"/> \$260,001 to \$280,000	\$400.00
C. <input type="checkbox"/> \$15,001 to \$25,000	\$75.00	J. <input type="checkbox"/> \$140,001 to \$160,000	\$250.00	Q. <input type="checkbox"/> \$280,001 to \$300,000	\$425.00
D. <input type="checkbox"/> \$25,001 to \$40,000	\$100.00	K. <input type="checkbox"/> \$160,001 to \$180,000	\$275.00	R. <input type="checkbox"/> \$300,001 to \$320,000	\$450.00
E. <input type="checkbox"/> \$40,001 to \$60,000	\$125.00	L. <input type="checkbox"/> \$180,001 to \$200,000	\$300.00	S. <input type="checkbox"/> \$320,001 to \$340,000	\$475.00
F. <input type="checkbox"/> \$60,001 to \$80,000	\$150.00	M. <input type="checkbox"/> \$200,001 to \$220,000	\$325.00	T. <input type="checkbox"/> Over \$340,000	\$500.00
G. <input type="checkbox"/> \$80,001 to \$100,000	\$175.00	N. <input type="checkbox"/> \$220,001 to \$240,000	\$350.00		

ENTER FEE TO BE PAID:

MAKE CHECKS PAYABLE TO: **STATE OF
MICHIGAN**

DEPARTMENT USE ONLY

MOTOR VEHICLE REPAIR FACILITY REGISTRATION APPLICATION

15. Is the business franchised?

☐ NO ☐ YES (If you checked YES, complete Item 16.)

16. Company and person selling franchise.

Company

Person

17. Has any owner, officer, partner, member, trustee or other person listed on this application owned or participated in any other repair facility?

☐ NO ☐ YES (If you checked YES, complete Item 18.)

18. List all current or former repair facility registration numbers.

19. REPAIRS OFFERED - Check every category of motor vehicle repair you will offer.

Automobiles and Light Trucks (under 10,000 #GVW)

- A. ☐ All Repairs B through I
B. ☐ Engine Repair
C. ☐ Automatic Transmission
D. ☐ Manual Transmission
E. ☐ Front End, Suspension and Steering Systems
F. ☐ Brakes and Braking Systems
G. ☐ Electrical Systems
H. ☐ Heating and Air Conditioning
I. ☐ Engine Tune-Up/Performance
J. ☐ Pre-1973 Vehicles

Recreational Trailers

- N.
- ☐
- Recreational Trailer Repair

Heavy-Duty Trucks (over 10,000 #GVW)

- P. ☐ All Truck Repairs Q through V
Q. ☐ Engine Repair - Gasoline
R. ☐ Engine Repair - Diesel
S. ☐ Drive Train
T. ☐ Brakes and Braking Systems
U. ☐ Suspension and Steering Systems
V. ☐ Electrical Systems

Motorcycle

- M.
- ☐
- Motorcycle Repair

Other Repairs

- Z. ☐ Body and Collision Repairs
☐ Other (specify) _____

20. CERTIFICATION OF MECHANICS - If your facility will be doing major repairs (A-V in Item 19 above), replacing collision-damaged mechanical components, or repairing structurally damaged unitized body vehicles, you must employ certified mechanics. Mechanics must be certified in the categories of repair offered.

MECHANIC'S NAMEMICHIGAN CERTIFICATION NUMBER

You may attach additional pages, if necessary.

NOTE - You may have mechanics in your facility who need state testing and certification. For information about where and when testing is available, contact the Secretary of State office in your area, or call the Michigan Department of State, Licensing Unit at 1-888-767-6424. Information regarding mechanic trainee permits can also be obtained by calling this number.

21. ARRESTS OR CONVICTIONS - Has any person listed in Item 22 been arrested or convicted of a crime, other than a traffic violation, in Michigan or any other state in the past 10 years? ☐ NO ☐ YES

If your answer is YES, give the name(s) of the person(s) involved and complete details of all arrests or convictions which took place. Attach an additional sheet, if necessary.

Name(s) of person(s) arrested or convicted: _____

Details: _____

Date of Arrest(s) or Conviction(s): _____

Court of Record: _____

City and State: _____

MOTOR VEHICLE REPAIR FACILITY REGISTRATION APPLICATION**22. CERTIFICATION AND AUTHORIZED SIGNATURES**

(If individual ownership, owner must sign. If partnership, all partners must sign. If limited liability company, all members must sign. If trust, the trustee must sign. If corporation, a corporate officer must sign, and all corporate officers, directors, resident agents in Michigan, and owners of 10% or more of the corporation must be listed.)

On this _____ day of _____, _____, I (we) certify to the truth and accuracy of all statements and representations made in this application, including all statements attached hereto. Further, I (we) stipulate and agree that any legal process affecting this business served on the Secretary of State or his/her deputies shall have the same effect as if personally served on me (us) and all other owners of this business, if any. I (We) further agree that this appointment shall remain in force as long as any liability of the business shall remain outstanding within the State of Michigan. I (We) understand that if I (we) do major repairs, I (we) shall employ mechanics certified with the State of Michigan in the categories of repair I (we) offer.

Any misleading, incomplete, or false statement may be grounds for denial of this application or suspension or revocation of the registration. Failure to notify the Michigan Department of State of material changes may be grounds for suspension or revocation of the registration.

PLEASE PRINT EXCEPT FOR SIGNATURE. ALL CORPORATE OFFICERS AND OWNERS OF 10% OR MORE OF THE BUSINESS INTEREST MUST BE LISTED BELOW. SEE FIRST PARAGRAPH ABOVE.

Owner, Partner, Officer, Trustee, Director, Resident Agent or Member Name	Signature	Title
Michigan Driver's License Number or Michigan Identification Number		
Corporation Identification Number (State)	or	(Federal)
Home Address (Street)	(City/State)	(Zip Code)
Principal Occupation for Past Five (5) Years		Birth Date
Owner, Partner, Officer, Trustee, Director, Resident Agent or Member Name	Signature	Title
Michigan Driver's License Number or Michigan Identification Number		
Corporation Identification Number (State)	or	(Federal)
Home Address (Street)	(City/State)	(Zip Code)
Principal Occupation for Past Five (5) Years		Birth Date
Owner, Partner, Officer, Trustee, Director, Resident Agent or Member Name	Signature	Title
Michigan Driver's License Number or Michigan Identification Number		
Corporation Identification Number (State)	or	(Federal)
Home Address (Street)	(City/State)	(Zip Code)
Principal Occupation for Past Five (5) Years		Birth Date
Owner, Partner, Officer, Trustee, Director, Resident Agent or Member Name	Signature	Title
Michigan Driver's License Number or Michigan Identification Number		
Corporation Identification Number (State)	or	(Federal)
Home Address (Street)	(City/State)	(Zip Code)
Principal Occupation for Past Five (5) Years		Birth Date

Mail completed application and fee to:

Michigan Department of State
Driver Programs Division
Business Licensing Section
Lansing, Michigan 48918

You may attach additional pages, if necessary.

SERVICING FACILITY AGREEMENT

(Class A and B Dealers Only)

All A and B dealer license applicants must already have a currently registered repair facility, or must submit either a repair facility registration application or a servicing facility agreement with the dealer license application. The servicing facility must be located within 10 miles of the dealership's established place of business. Another form may be used if it contains all of the information below.

I, _____, of _____,
(owner/partner/officer) (repair facility name)

located at _____,
(business address)

repair facility registration number _____, agree to perform vehicle repairs
(registration number)

for _____. My repair facility is
(Dealership name)

currently registered with the Michigan Department of State and will remain registered as long as this agreement remains in effect.

We will inform the Michigan Department of State if this agreement is canceled.

(Signature of repair facility owner/partner/officer)

(Date)

(Signature of dealership owner/partner/officer)

(Date)

ZONING APPROVAL

Name of Dealership: _____

Dealership Address: _____
(Street) (City) (Zip)

Dealer License Number (if applicable): _____

- ☐ Class A - New Vehicle Dealer
- ☐ Class B - Used Vehicle Dealer
- ☐ Class C - Used Vehicle Parts Dealer
- ☐ Class D - Broker
- ☐ Class E - Distressed Vehicle Transporter
- ☐ Class F - Vehicle Scrap Metal Processor
- ☐ Class G - Vehicle Salvage Pool
- ☐ Class R - Automotive Recycler
- ☐ Class W - Automotive Wholesaler

Zoning Authority:

The license(s) being applied for (checked above) would permit, but not require, all business activities described on the reverse. Please check the appropriate category below, complete the signature portion of this form, and return this completed form to the applicant.

If you have any questions or concerns, contact the Michigan Department of State, Licensing Unit, at 1-888-SOS-MICH (1-888-767-6424).

Thank you.

- ☐ Location is **APPROVED** for dealer classification(s) checked above.
- ☐ Location is **DISAPPROVED** because it is not properly zoned.
- ☐ Location is **APPROVED** because there is NO zoning ordinance in effect.

Signature of Zoning Authority Date Telephone Number

Printed Name of Zoning Authority	Jurisdiction (City, Township, etc.)
----------------------------------	-------------------------------------

Class A (New Vehicle Dealer) - This dealer buys and sells new vehicles under a franchise agreement or a contract with a new vehicle manufacturer.

Class B (Used Vehicle Dealer) - This dealer buys and sells used vehicles.

Class C (Used Vehicle Parts Dealer) and Class R (Automotive Recycler) - These dealers buy or otherwise acquire late model major component parts for resale, either at wholesale or at retail, and/or acquire vehicles to dismantle for the resale of their parts, selling the remains as scrap. These are the only classes which can legally buy late model distressed vehicles (salvage or scrap vehicles) or late model major component parts from insurance companies, or through auctions, brokers, or salvage pools in Michigan.

Class D (Broker) - This dealer "brokers" the sale of vehicles or late model major component (salvageable) parts by arranging (or offering to arrange) for the sale of the vehicles or parts between two parties. A broker **may not** take ownership of the vehicles or major component parts.

Class E (Distressed Vehicle Transporter) - This dealer may: 1) buy or acquire ownership of, 2) transport, and 3) sell scrapped or junked vehicles only. Vehicles may be sold at wholesale only to:

1. Used Vehicle Parts Dealers (Class C); or
2. Scrap Metal Processors (Class F); or
3. Automotive Recyclers (Class R).

This dealer may NOT dismantle vehicles or sell parts. (Note: A vehicle "crusher" is one type of distressed vehicle transporter.)

Class F (Vehicle Scrap Metal Processor) - This dealer processes vehicles into scrap metal by shearing, fragmenting, baling, shredding, etc. (Crushing vehicles is not considered a scrap metal process since it is not the final step before remelting.)

A scrap metal processor who acquires vehicles only from licensed dealers is not required to be licensed but must keep certain records and make them available for inspection.

Class G (Vehicle Salvage Pool) - This dealer engages in the business of storing and displaying damaged or distressed vehicles for insurance companies. Class G is compatible only with Class D.

Class W (Automotive Wholesaler) - This dealer engages in the business of buying and selling used vehicles from and to licensed vehicle dealers. A wholesaler may not buy, sell or otherwise deal in vehicles to a person other than a licensed vehicle dealer.

MUNICIPALITY APPROVAL

Name of Dealership: _____

Dealership Address: _____
(Street) (City) (Zip)

Dealer License Number (if applicable): _____

- ☐ Class A - New Vehicle Dealer
- ☐ Class B - Used Vehicle Dealer
- ☐ Class C - Used Vehicle Parts Dealer
- ☐ Class D - Broker
- ☐ Class E - Distressed Vehicle Transporter
- ☐ Class F - Vehicle Scrap Metal Processor
- ☐ Class G - Vehicle Salvage Pool
- ☐ Class R - Automotive Recycler
- ☐ Class W - Automotive Wholesaler

Municipal Authority:

The license(s) being applied for (checked above) would permit, but not require, all business activities described above. Please check the appropriate category below, complete the signature portion of this form, and return this completed form to the applicant.

If you have any questions or concerns, contact the Michigan Department of State, Business Licensing Section at 1-888-SOS-MICH (1-888-767-6424).

Thank you.

Municipality requirements may include; local building code requirements, land use requirements, sign ordinances, local licensure, etc...

☐ Location **MEETS** all the municipal requirements for dealer classification(s) checked above.

☐ Location **DOES NOT MEET** all the municipal requirements for dealer classification(s) checked above. Please list the reason(s).

Reason:

☐ There are **NO MUNICIPAL REQUIREMENTS** in this jurisdiction for dealer classification(s) checked above.

Signature of Municipal Authority Date () Telephone Number

Printed Name of Municipal Authority Jurisdiction (City, Township, etc.)

UNIFORM VEHICLE DEALER SURETY BOND

PLEASE READ INSTRUCTIONS ON REVERSE SIDE OF THIS SHEET BEFORE EXECUTING BOND

KNOW ALL MEN BY THESE PRESENTS, that**BOND NUMBER**

As principal, whose place(s) of business is/are located at the address(es) set forth above, and

_____ as surety are held and firmly bound unto any purchaser, seller, financing agency, or governmental agency for any monetary loss cause through fraud, cheating or misrepresentation in the conduct of the vehicle business by the named principal in the total penal sum of Ten Thousand and NO/100 Dollars (\$10,000), lawful money of the United States of America, for which sum well and truly to be paid, said principal and surety bind themselves, their heirs, executors, administrators, and assigns, jointly and severally and each of them.

WHEREAS, the above named principal is applying to the Secretary of State of Michigan to be licensed as a dealer in vehicles under Section 248 of Act 300, P.A. of 1949, as amended.

AND WHEREAS, the above named principal is required by Section 248 of Act 300, P.A. of 1949, as amended, to submit properly executed surety bond, conditioned as set forth below, with said application for vehicle dealer license.

NOW THEREFORE, the condition of this obligation is such that the principal and surety shall indemnify or reimburse any purchaser, seller, financing agency or governmental agency for any monetary loss only after judgment based on fraud, cheating or misrepresentation has been entered in a court record against the licensee.

The obligation under this surety bond shall be further conditioned to indemnify or reimburse the State of Michigan for any sales tax deficiency as provided in Act 167 of the Public Acts of 1933, as amended, being Sections 205.51 to 205.78 of the compiled laws of 1948, or use tax deficiency as provided in Act 94 of the Public Acts of 1937, as amended, being Sections 205.91 to 205.111 of the compiled laws of 1948, for the year in which the bond was in force. The surety shall be required to make such indemnification or reimbursement only after final judgment has been entered in a court of record against the licensee.

It is further understood and agreed that coverage is provided and extended without notification to the surety for any change of officers, if the principal is a corporation; for any additional locations or changes of address within the county for which the license is issued; or for any substitution of business name wherein ownership is not changed.

Provided further, that the aggregate liability of the surety for all such judgments shall, in no event, exceed the sum of the bond.

Coverage hereunder shall be effective as of 12:01 a.m. on _____ and shall remain in effect continuously, provided, however, that the said surety may cancel the bond upon giving thirty days notice in writing to the Secretary of State and thereafter shall be relieved of liability for any breach of condition occurring after the effective date of the cancellation.

Signed, sealed and dated this _____ day of _____, _____.

(Important: ALL Signatures Are Required)_____
Signature of Witness to Principal_____
Print or Type Name of Witness to Principal_____
Signature of Witness to Attorney-in-Fact_____
Print or Type Name of Witness to Attorney-in-Fact_____
Signature of Licensed Resident Insurance Agent_____
Print or Type Name of Resident Insurance Agent_____
Signature of Dealer Principal or Authorized Agent of Principal_____
Print or type Name and Title of Person Signing for Principal_____
Name of Surety Company_____
Signature of Attorney-in-Fact_____
Print or Type Name of Attorney-in-Fact

THIS BOND MUST BE CORRECTLY COMPLETED OR A DEALER LICENSE CANNOT BE ISSUED.

DEALER: DOUBLE CHECK these points!

Follow the instructions and avoid unnecessary delay and expense.

- The **EXACT** business name and address of the dealership must appear on the face of the bond as it appears on the dealer license application.
- Individual owners and partners **MUST** be listed in addition to the business name and address.
- Corporate officers, etc. do not need to be listed for a corporation. **ONLY** the corporate name (d/b/a assumed name, any) and the address need to appear.
- **BOND NUMBER** must be on the face of the bond.
- Name of Surety must be listed.
- **SIGNATURES ARE REQUIRED** for:
 - Attorney-in-Fact for the Surety
 - Witness to the Attorney-in-Fact for the Surety
 - Licensed Resident Insurance Agent (Agent who sold the bond) **IMPORTANT!!!**
 - Principal (dealer license applicant)
 - Witness to Principal
- A power of attorney for the Attorney-in-Fact **MUST** accompany the bond **OR** must **BE ON FILE** with the Michigan Department of State, Dealer Division, Lansing, MI 48918.

Remember, if the bond is not correctly completed, a dealer license cannot be issued.

UNIFORM VEHICLE DEALER SURETY BOND INSTRUCTIONS

1. Every applicant for a vehicle dealer license must file with such application an executed surety bond in the amount of Ten Thousand and NO/100 Dollars (\$10,000.00). (Class "C", "E", "F", "G", "R", and "W" Dealers exempt.)
2. The Department of State has prescribed a standard form of bond for vehicle dealers which is set forth on the reverse side hereof. This bond must be executed by the principal and surety and filed with the Department of State at the time of filing application for vehicle dealer license.
3. This bond must be executed by the principal (dealer) and surety company and filed with the Department of State at the time of filing application for vehicle dealer license. Application for dealer license will not be acted upon until the application, bond and all other required documents are filed, and the appropriate fees paid to the Department of State in Lansing.
4. Each licensee, whether an individual, corporation, or partnership, must be named in the bond as principal. In the case of an individual proprietorship, the individual's name, as well as the name under which business is being conducted, must be listed. In case of partnerships, each individual partner, as well as the name of the partnership itself, must be listed. In the case of corporations, the corporation itself must be shown on the bond but, the officers whose names appear on the application for license need not be listed on the bond. The location of the business must also be listed. If a licensee is doing business at more than one location within a county, all such locations must be listed.
5. This is a continuous surety bond, the effective date of which may be the date of execution or a later date; however, the bond must be effective at the date of filing of application for a vehicle dealer license even though the license may not be issued until a subsequent date.
6. The bond must be executed by a surety company authorized to do business in Michigan. Every bond must be executed by a resident agent of the company licensed to do business in Michigan. If the agent is a licensed non-resident agent, the bond must also be countersigned by a licensed resident agent.
7. The attorney-in-fact who signs for the surety company must be authorized by the company. A certified copy of the appointment as attorney-in-fact must be attached to the surety bond, or a continuing copy of the appointment as attorney-in-fact must be on file with the Department.
8. The affidavit of the power of attorney must be executed on the same date as the bond, or subsequent to the date of the bond, but not before.
9. A dealer is only authorized to conduct business if a \$10,000 bond is in effect. Therefore, if the surety company pays any claim under this bond, it will have the effect of reducing the bond coverage afforded to the dealer by the amount of the claim that is paid. If this occurs, the dealer will no longer be covered by the full, required amount of \$10,000. Surety companies are requested to notify the Department of State of the payment of any claims under this bond.

LIVESCAN FINGERPRINT REQUEST

Instructions for Applicant:

1. Complete APPLICANT INFORMATION below.
2. Schedule an appointment to be fingerprinted:
 - a. Visit www.michigan.gov/msp
 - b. In the Search box, type "Private Livescan Vendors," and click on Go.
 - c. Select the [MSP – Private Live Scan Vendors](#) link for list of vendors.
3. Attend appointment, pay fee, and keep the receipt.
4. Bring picture ID and this completed form to the appointment.

Criminal history report will be forwarded to the Department of State by the Michigan State Police.

Date fingerprinted: _____ Type of picture ID presented: _____

APPLICANT INFORMATION

Must provide a picture ID to be printed

Applicant Name _____
Last, first, middle

Date of Birth _____ Race _____ Sex _____

Applicant address _____
_____ Zip _____

Applicant phone number _____

REQUESTING AGENCY INFORMATION

Agency ID: **1340A** Agency Name: **Bureau of Driver and Vehicle Programs**
(RQID)

Reason fingerprinted:

AR—Department of State, Bureau of Driver and Vehicle Programs

****Disclaimer:** Any and all fingerprints processed with incorrect fingerprint codes/reasons, etc, are the applicant's responsibility. Michigan State Police will charge for second requests due to incorrect fingerprint reason.