



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

CUSTOMER NUMBER

EFFECTIVE DATE

EXPIRATION DATE

CURRENT BUSINESS NAME

INSTRUCTIONS:

Use this form for a name change, address change, name and address change, add or remove an owner, partner, LLC member or corporate officer, and change type of organization (like LLC to corporation, partner to corporation). **Complete both sides of this form** and submit it to DMV Business License Unit, 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 Form 370 Packet since a vehicle dealer certificate is not transferable.

- The fee for a corrected certificate to change your business name, location, organization structure or to add/remove owners is \$30.
- The fee for a corrected certificate to change your business name **AND** location is \$60.
- 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 photo ID if changing residence address.
- Your dealer number and expiration date will stay the same.

VALIDATION USE ONLY

1

Check the reason you are applying for a correction: **Name Change (\$30)** **Address Change (\$30)** **Add. / Removing Owners (\$30)**
 Name & Address Change (\$60) **Org. / Structure Change (\$30)**

NAME CHANGE

2

NEW BUSINESS NAME (If assumed business name, fill in Registry Number.) OREGON REGISTRY NUMBER BUSINESS TELEPHONE
()

Any alteration of Line 3 voids location approval.

ADDRESS CHANGE

3

NEW LOCATION WHERE BUSINESS WILL BE CONDUCTED (STREET ADDRESS) RESIDENCE PREVIOUS SUPPLEMENTAL BUSINESS TELEPHONE
()

4

CITY ZIP CODE COUNTY

5

RESIDENCE ADDRESS CITY ZIP CODE

6

MAILING ADDRESS CITY ZIP CODE

7

PREVIOUS 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 license, 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. Your approval below should be based upon whether the applicant can do **ANY** of the activities listed in (a) through (c) above under your ordinances, at the location of the business given on Line 3. Pursuant to ORS 822.025(6)(b)(A)(B), applicant meets requirements below.

As the zoning official for the locality in which this business is located, I verify by my signature below that the location of this business as stated on this application, complies with any land use ordinances and business regulatory ordinances of the city or county, as appropriate pursuant to ORS822.025.6(a)

8

CITY OF: COUNTY OF: TELEPHONE NUMBER
()

9

PRINT NAME TITLE

10

SIGNATURE DATE
X

▽ Place stamp or seal here ▽

OWNERSHIP CHANGE

Check your organization type on **Line 11**, list all owners and provide other required information below. Your dealer number and expiration date will stay the same. If adding names, please attach (staple) copies of ALL new owners, partners, LLC members or corporate officers official photo ID's (driver license or state issued identification card ONLY). 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 whose law 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 SIGNATURE OF PERSON CERTIFYING _____ 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 SIGNATURE OF PERSON CERTIFYING _____ DATE _____
X

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

22 PRINT NAME _____ SIGNATURE **X** _____ TITLE _____

23 PRINT NAME _____ SIGNATURE **X** _____ TITLE _____

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 \$1,000 or both. In addition, civil penalties of up to \$1,000 and DMV sanctions against you or your dealer certificate may be imposed. With the above penalties 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. I give consent for DMV to check my name through OSP Central Bureau of Criminal Investigation, and to check DMV records to determine whether I owe money on an outstanding civil penalty.

24 SIGNATURE OF PERSON CERTIFYING _____ TITLE _____
X

25 BOND ENDORSEMENT	LIABILITY ENDORSEMENT
26 Attach rider from bonding company	Attach new certificate of insurance from insurance company