



# APPLICATION TO CORRECT BUSINESS CERTIFICATE

AS A DISMANTLER OF MOTOR VEHICLES OR  
SALVAGE POOL OPERATOR

CERTIFICATE NUMBER

EXPIRATION DATE

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

## NAME CHANGE

2 NEW BUSINESS NAME \_\_\_\_\_ OREGON REGISTRY NUMBER \_\_\_\_\_ BUSINESS TELEPHONE NUMBER ( )

## ADDRESS CHANGE (Any alteration of Line 3 voids location approval.)

3 NEW LOCATION WHERE BUSINESS WILL BE CONDUCTED (STREET ADDRESS) \_\_\_\_\_ BUSINESS TELEPHONE NUMBER ( )

4 CITY \_\_\_\_\_ ZIP CODE \_\_\_\_\_ COUNTY \_\_\_\_\_

5 RESIDENCE ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP CODE \_\_\_\_\_

6 MAILING ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ ZIP CODE \_\_\_\_\_

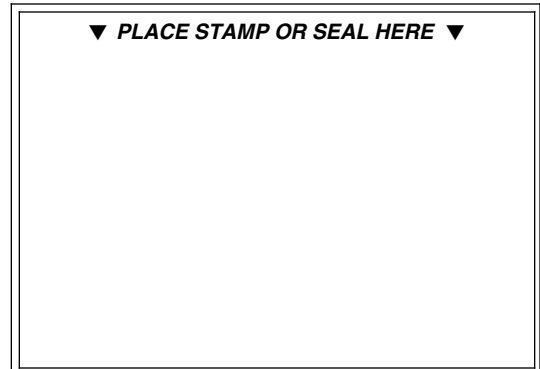
7 PREVIOUS LOCATION \_\_\_\_\_ CITY \_\_\_\_\_ ZIP CODE \_\_\_\_\_

8 a) THE DIMENSIONS OF THE PROPERTY ON WHICH THE BUSINESS IS LOCATED ARE \_\_\_\_\_ ft. X \_\_\_\_\_ ft.  
b) ORS 822.115(4) requires applicants to file a **description of the location** of the dismantling yard. Accordingly, please file a plat map or other description of the location of the premises.

9 **By signing this application you are also certifying that:**  
1. The right of way of any highway adjacent to the area proposed for approval to conduct the dismantling business is used for access to the premises and public parking;  
2. You maintain a building or enclosure or other barrier at least six feet high for the purpose of conducting the dismantling business;  
3. You will not store any vehicles or vehicle parts or conduct the dismantling business outside of the building, enclosure or barrier;  
4. The business is hidden and adequately screened by the terrain or other natural objects or by plants, fences or other appropriate means so as not to be visible from the main traveled way or the highway except as permitted by ORS 822.135.

10 **LOCAL GOVERNMENT APPROVAL (CITY / COUNTY)**  
By signing this application you are authorizing dismantler business to be conducted at the location listed on Line 3 of this application. **If a dismantler business cannot be conducted at that location, or if any of the conditions below are not met, do not sign this approval.**

I CERTIFY THAT THE GOVERNING BODY OF THE  CITY  COUNTY OF \_\_\_\_\_ HAS:  
A) APPROVED THE APPLICANT AS BEING SUITABLE TO ESTABLISH, MAINTAIN OR OPERATE A DISMANTLING YARD OR BUSINESS (ORIGINAL APPLICATIONS ONLY).  
B) DETERMINED THAT THE LOCATION OR PROPOSED LOCATION MEETS THE REQUIREMENTS FOR LOCATION UNDER OREGON REVISED STATUTE 822.110.  
C) DETERMINED THAT THE LOCATION DOES NOT VIOLATE ANY APPLICABLE PROVISION OF ORS 822.135.  
D) APPROVED THE LOCATION AND DETERMINED THAT THE LOCATION COMPLIES WITH ANY REGULATIONS ADOPTED BY THE JURISDICTION UNDER ORS 822.140.



I ALSO CERTIFY THAT I AM AUTHORIZED TO SIGN THIS APPLICATION AND AS EVIDENCE OF SUCH AUTHORITY DO AFFIX HEREON THE SEAL OR STAMP OF THE CITY OR COUNTY.

11 NAME \_\_\_\_\_ TITLE \_\_\_\_\_ PHONE NUMBER ( )

12 SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
X

## OWNERSHIP CHANGE

Check your organization type on **Line 13**, list all owners and provide other required information below. Your dismantler 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.

**13**     **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.

**14**    PRINT NAME (MUST SIGN LINE 19) \_\_\_\_\_ TITLE \_\_\_\_\_

**15**    DATE OF BIRTH \_\_\_\_\_ DRIVER LICENSE NUMBER \_\_\_\_\_ STATE OF ISSUE \_\_\_\_\_ HOME PHONE NUMBER (    ) \_\_\_\_\_

**16**    RESIDENCE ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

**17**    MAILING ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

**18**    SIGNATURE OF PERSON CERTIFYING \_\_\_\_\_ DATE \_\_\_\_\_  
**X**

**19**    PRINT NAME (MUST SIGN LINE 24) \_\_\_\_\_ TITLE \_\_\_\_\_

**20**    DATE OF BIRTH \_\_\_\_\_ DRIVER LICENSE NUMBER \_\_\_\_\_ STATE OF ISSUE \_\_\_\_\_ HOME PHONE NUMBER (    ) \_\_\_\_\_

**21**    RESIDENCE ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

**22**    MAILING ADDRESS \_\_\_\_\_ CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP CODE \_\_\_\_\_

**23**    SIGNATURE OF PERSON CERTIFYING \_\_\_\_\_ DATE \_\_\_\_\_  
**X**

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

**24**    PRINT NAME \_\_\_\_\_ SIGNATURE **X** \_\_\_\_\_ TITLE \_\_\_\_\_

**25**    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, DMV sanctions against you or your dismantler certificate may be imposed. With this in mind, I certify that I am the owner, a partner, an LLC member, or a corporate officer of this business and that all information on this application is accurate and true. I certify that the right of way of any highway adjacent to the location listed above is used for access to the premises and public parking.

**26**    SIGNATURE OF PERSON CERTIFYING \_\_\_\_\_ TITLE \_\_\_\_\_  
**X**

<p><b>27</b>    <b>BOND ENDORSEMENT</b></p> <p><b>28</b>    <b>Attach rider from bonding company</b></p>	<p><b>VALIDATION USE ONLY:</b></p>
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# INSTRUCTIONS FOR COMPLETING A CORRECTION APPLICATION FOR A DISMANTLER CERTIFICATE

Use this form for:

- Name change;
- Address change;
- Name & address change;
- Add or remove an owner, partner, LLC member or corporate officer: or
- Change type of organization (like LLC to corporation, partner to corporation, etc.)

Complete both sides of the application and submit your completed application along with the fees to:

DMV Business License Unit  
1905 Lana Ave NE  
Salem OR 97314

The fee for a corrected dismantler certificate to change your business name, business location, organization structure or to add/remove owners, partners, LLC members or corporate officers is \$30.

For change of address requires location approval by city or county zoning.

Attach a rider from your bonding company amending any business name or address changes.

## **ADDING NEW OWNER, PARTNER, LLC MEMBER OR CORPORATE OFFICER**

Each new owner, partner, LLC member or corporate officer being added needs to complete and sign Lines 14-23.

You need to provide a copy of photo ID if you are adding new owners, partners, LLC members or corporate officers or changing residence address. If the residence address on the photo ID does not match the residence address on the application, provide a statement explaining why the addresses do not match.

Attach a rider from your bonding company.

## **REMOVING OWNER, PARTNER, LLC MEMBER OR CORPORATE OFFICER**

Each owner, partner, LLC member or corporate officer being removed needs to complete and sign Lines 24-25.

Attach a rider from your bonding company.

## **CERTIFICATION**

One owner, partner, LLC member or corporate officer needs to sign Line 26.

Your dismantler number and expiration date will stay the same. If the business has been sold, the new owner(s) need to obtain their own vehicle dismantler certificate using Form 735-373 since a vehicle dismantler certificate is non-transferable.

## **COUNTER HOURS & ADDRESS**

DMV Business License Unit  
1965 Lana Ave NE  
Salem OR 97314

8:00 A.M. – 4:30 P.M., MONDAY – FRIDAY, EXCEPT HOLIDAYS