

## **Step by Step Guide for completing the Vehicle Dealer and Automotive Mobility Dealer License Application (State Form 56187)**

You can access the Vehicle Dealer and Automotive Mobility Dealer License Application (State Form 56187) at <https://secure.in.gov/sos/dealer/2383.htm>.

### **Field 1—Name in which the Dealer license will be issued.**

- The name needs to be the business name you will be operating under and the name that will appear on your signage.
- If you are a corporation or an LLC and will be operating under an assumed (DBA) name, the application needs to state the assumed (DBA) name. That name needs to be stated on all the documents you attach to your application including your business sign.
- Your assumed (DBA) name needs to be registered with Business Services Division of the Indiana Secretary of State.

### **Field 2—Web Address of your business**

The website address for your dealer business, if you have one, must be provided.

### **Field 3—Business phone numbers and E-mail address**

- The daytime phone number needs to be the phone number for your business location. We primarily use e-mail addresses to contact dealers, but prefer to handle time-sensitive matters by telephone when possible.
- The e-mail address needs to be the email address at which you want to be contacted and should be one you check regularly. Certain notifications about your license and/or license status will be sent to this e-mail address. If a previously provided e-mail address changes, please let our office know immediately.

### **Field 4—Address of the Established Place of Business**

This should be the physical location where you will be operating your business. This address needs to be on all documents you submit with your application. Each location requires its own license.

### **Field 5—Federal identification number (FID)**

The federal identification number (also called an employer identification number or EIN) is issued to your business by the IRS. That number must be on the Retail Merchant Certificate you submit with your application or you can include a copy of the letter you received from the IRS telling you what your federal identification number is.

**Field 6—Retail Merchant Tax identification number (TID) and location number (LOC)**

The tax identification number and location number are issued by the Indiana Department of Revenue. They appear on your Retail Merchant Certificate as the TID & LOC numbers. You must submit a copy of the Retail Merchant Certificate with your application. The certificate must state the business name and address as it appears on the application.

**Fields 7 and 7a—Is the established place of business location owned or leased?**

- Check the box to indicate whether your established place of business location is leased or owned.
- If it is leased you must provide the name, address & phone number of the person or company from whom you are leasing your building.

**Field 8—Type of business entity**

- Check only one box that indicates your type of business.
- If your business is an LLC or LLP, you must submit a copy of your certificate of organization issued by the Indiana Secretary of State.
- If your business is a corporation, you must submit a copy of your certificate of incorporation issued by the Indiana Secretary of State.
- If your business was organized or incorporated in a state other than Indiana (foreign), you must submit a copy of the out of state certificate and a certificate that your foreign business is registered to do business in the State of Indiana.

**Field 8a—Name of Business Entity**

- Enter the name of your business entity if it is different than what you entered in Field 1.
- Enter the address for your business entity if it is different than what you entered in Field 4.

**Field 8b—Business Entity Creation**

If your business is a corporation, LLC, or LLP, enter the date and state of incorporation/organization/registration.

**Field 9—Service of Process**

- Enter the name and address of the person you want to receive legal service of process for your business, as well as their relationship to you.
- The address provided must be in Indiana and ideally is different from the address of the established place of business.

## **Field 10 – Owners/Officers/Partners**

Each owner must submit a photocopy of their valid government issued photo ID, (front and back) and complete a National FBI Criminal History Background Check. Do not send fingerprints with your application.

### **Field 10a—Primary Owner**

- Enter the name and information for the primary owner for your business.
- This is the owner that will be assigned a PIN number required for the initial online account creation and set up. This person will also receive notifications about the license.

### **Field 10b and 10c—Owner(s)**

Enter the name(s) and information for all other owner(s) of the business, if applicable. Attached additional sheets, if necessary. The first three listed owners, including the primary owner, will be printed on the dealer license. However, more than three (3) owners can be listed on the license application.

Each dealer owner and dealer manager must submit a photocopy of their valid government issued photo ID, (front and back) and complete a National FBI Criminal History Background Check. Do not send fingerprints with your application.

“Dealer owner” is defined by Indiana Code § 9-32-2-9.9 as follows:

- For a licensed or applicant dealer, other than a manufacturer, that is a *corporation*
  - Each officer, director, and shareholder having a ten percent (10%) or greater ownership interest in the corporation.
  - If no officer, director, or shareholder has a ten percent (10%) or greater ownership interest in the corporation, one (1) or more officers, directors, or shareholders designated in writing by the board of directors.
- If the licensed or applicant dealer, other than a manufacturer, is a *sole proprietorship*, the proprietor.
- If the licensed or applicant dealer, other than a manufacturer, is a *partnership*, each partner.
- If the licensed or applicant dealer, other than a manufacturer, is a *limited liability company*, each member of the company.

“Dealer manager” is defined by Indiana Code § 9-32-2-9.7 as follows:

- An individual who works at the established place of business of a dealer and who is responsible for and is in charge of the day to day operations, including the management, direction, and control of the dealership

### **Field 11a—Questions about owner(s)**

- Check the yes or no check box to answer the question if any of the owners, officers, or partners of the business have owned or worked for another dealer in Indiana or any other state.
- If any owner, officer, or partner has owned or worked for another dealer, enter their information in the remaining fields in this section.
- If more than one owner, officer, or partner has owned or worked for another dealer, enter the requested information about them on additional sheets.

### **Field 11b—Questions about owner(s)**

Check the yes or no checkbox to answer the question whether any owner, office, partner of the business has had a dealer license suspended or revoked or had an application for a dealer license denied in Indiana or any other state. If any owner, officer, or partner has had a license suspended or revoked, or an application for a license denied, enter the details in the space provided. Attach additional sheets, if necessary.

### **Field 11c – Location Usage**

- Check the yes or no checkbox to answer the question whether the established place of business is devoted solely to the buying, selling, and/or exchanging of vehicles.
- If “no” is selected, provide an explanation of what else the established place of business is used for.

### **Field 12—Insurance information**

Enter the name of your insurance carrier or risk retention group, policy number, and expiration date. You must also submit with your application a copy of your Certificate of Liability. Indiana law requires you to maintain current insurance meeting minimum limits for the entire period your license (if granted) is valid.

### **Field 13—Bond information**

Enter the name of your bond carrier, bond number, and expiration date. You must also submit with your application a copy of your completed bond form (State Form 53966). Indiana law requires you to maintain a current \$25,000 bond for the entire period your license (if granted) is valid.

You can access State Form 53966 at <https://secure.in.gov/sos/dealer/2383.htm>.

### **Field 14—Type of License**

Check the checkbox next to the type of dealership for which you are applying to be licensed.

**Field 15—Type(s) of vehicle(s) to be sold**

Check the checkbox next to the type of vehicle you expect to sell. If you plan to sell multiple vehicle types, check all that apply. For each checked vehicle type, you must also indicate the following information:

- Whether you intend to sell new/used or used only. If you intend to sell new vehicles, you must apply for a New Dealer License and have a franchise with a manufacturer.
- Whether dealer plates are being requested, and if so, how many you are requesting. Note that the Division will make the final determination as to how many dealer plates you will be issued.
- If you are applying for a New Dealer License, whether you are requesting “M” plates.
- Whether you are requesting interim license plates, and if so, how many you are requesting. Note that the Division will make the final determination as to how many interim plates you will be issued.

**Field 16—Franchise**

If you are applying for a New Dealer License, you must indicate the franchise(s) you have been granted.

**Field 17—Number of Units**

Enter the number of vehicles you anticipate selling during the next twelve (12) month period. You must enter a number for both retail sales and wholesale sales.

**Field 17a—Number of full-time sales staff**

Enter the number of full-time employees that will be directly involved with selling vehicles.

**Field 17b—Number of other full-time staff**

Enter the number of all other full-time staff at your dealership.

**Field 18—Hours of Operation**

Enter a checkmark next to each day you plan to be open, and enter the opening and closing times for each selected day.

**Signature—Owner or Manager**

Indiana law requires that a dealer owner or dealer manager (as defined by statute) must sign the license application. The title of the dealer owner or dealer manager must also be entered in the appropriate field, along with the date of signature.

## Required Documents:

Along with completing your application (State Form 56187), you must submit the following items. **An application cannot be approved until all required items have been submitted.**

The business name and address that appears on these documents should be identical to the name and address provided on the license application.

### 1. Zoning Affidavit

All applicants must submit a completed Zoning Affidavit (State Form 55936). If no person or officer has jurisdiction over the location, the applicant must submit a written statement by the executive of the unit in which the real property is located. The statement must indicate that the proposed location is zoned for the operation of the business for which the applicant is seeking a license.

State Form 55936 can be found at <https://secure.in.gov/sos/dealer/2383.htm>.

### 2. Indiana Vehicle Merchandising Certificate/Bond

All applicants must submit a completed Indiana Vehicle Merchandising Certificate/Bond (State Form 53966). Make sure that the principal name and address match the dealer name and address provided on your application, and that both the bond company and the dealer owner signs the form.

If the license is granted, a valid bond must be maintained on file with the Division for the entire licensing period. A lapse in coverage will result in the suspension of the license.

State Form 53966 can be found at <https://secure.in.gov/sos/dealer/2383.htm>.

### 3. Certificate of Insurance

All applicants must submit a Certificate of Liability indicating at least the minimum coverage required by statute (see Indiana Code § 9-32-11-13). Make sure the insured's name and address match the dealer name and address provided on your application. The State of Indiana must be the certificate holder.

If the license is granted, valid insurance must be maintained on file with the Division for the entire licensing period. A lapse in coverage will result in the suspension of the license.

4. Photos of the Established Place of Business

All applicants must submit color photographs of their established place of business (interior and exterior), including their office, display lot(s), storage lot(s), sign and posted hours of operation.

5. Business Entity Documentation

- If the applicant's business entity is a corporation, submit the Certificate of Existence.
- If the applicant's business entity is an LLC, submit the Certificate of Organization.
- If the applicant's business entity is an LLP or LP, submit the Certificate of Registration.
- If the applicant's business entity is a foreign entity, submit the Certificate of Authority or Registration, whichever is applicable.

6. Retail Merchant Certificate

All applications must submit a copy of their Retail Merchant Certificate issued by the Indiana Department of Revenue.

7. Photo Identification

A copy of the front and back of current government-issued photo identification for each owner/manager listed on the application must be submitted with the application.

8. Background Check

Every dealer owner and dealer manager (as defined above) must complete an FBI national criminal history background check. Background checks must be completed within sixty (60) days of the date of application. Older background checks will not be accepted.

9. License Fee

The \$30 license fee must accompany the application.

10. Accreditation

If applying for automotive mobility dealer, you must submit proof that your dealer business is accredited through the Quality Assurance Program of the National Mobility Equipment Dealers Association.

**\*\*\*All supporting documents must have the exact same dealer name and address as the dealer name (DBA, if applicable) and established place of business address indicated on the application.\*\*\***