

STATE OF OKLAHOMA
USED MOTOR VEHICLE AND PARTS COMMISSION
2401 NW 23rd, Suite 57
Oklahoma City, Oklahoma 73107
TELEPHONE (405)521-3600
FAX (405) 521-3604

The Oklahoma Statutes Title 47 Sections 581-587 require all used motor vehicle dealers and salespersons to be licensed and makes it the responsibility of the dealer to comply.

IMPORTANT: READ THE FOLLOWING CAREFULLY AND COMPLETELY.

All new applications for license are presented to the Commission Board for consideration the second Tuesday of each month. **All requirements with the exception of the photo of the sign must be submitted by the Friday eleven days before that meeting.** The license will be issued only after all of the requirements have been met. Making application does **NOT** authorize you to conduct any business as a used motor vehicle dealer.

1. Initial application for dealership completed in full, signed and notarized. Use the attached form. Please limit the name of your business to 30 characters including spaces. The name of your business must include auto sales, motors, used cars, cars, etc something reflecting the type of business to be conducted under this license, but it cannot duplicate the name of an existing licensed dealership. Contact our office for approval of business name before using it.

2. Proper fee of Three Hundred Dollars (\$300.00) submitted with application. The fee must be in the form of a check, money order or cashier's check. **This agency does not accept cash.** Fee is nonrefundable unless the Commission DENIES the application. If you are applying for both the used motor vehicle dealer license and the automotive dismantler license at the same time, the fee is Two Hundred Dollars (\$200.00) each. If you are currently licensed as an automotive dismantler, the fee for the used dealer's license is \$100.00. **IF YOU DO NOT COMPLETE THE REQUIREMENTS BY THE END OF THE CALENDAR YEAR IN WHICH YOU APPLY, YOUR APPLICATION WILL EXPIRE, AND YOU WILL BE REQUIRED TO MAKE A NEW APPLICATION ACCOMPANIED BY A NEW FEE FOR THE SUBSEQUENT YEAR.**

3. Personal History Questionnaire must be completed in full for the sole proprietor, or each partner, or each member of the LLC, or each corporate officer and the majority (largest) stockholder listed on the initial application. Use the attached form. You may make as many additional copies of the form as is needed.

4. Copy of Current Oklahoma Driver's License for each individual who is required to complete a personal history questionnaire.

5. Financial Statement must be completed in full for the sole proprietor, or each partner, or each member of the LLC, or the corporation and the majority (largest) stockholder. Use the attached form. You may make as many additional copies of the form as is needed.

6. Certificate of Insurance completed by your insurance agent as proof of \$25,000 single limit garage liability insurance on all vehicles offered for sale or used in any capacity. The certificate must show the ownership, name of business and the address of the lot location as they appear on the initial application. Coverage, in accordance with the financial responsibility laws of the State of Oklahoma, shall be kept in force at all times with no lapse in coverage during the period of licensure. **A lapse in coverage will result in automatic revocation of your license.**

7. \$15,000 Dealer's Bond completed by your bonding agent. The original bond, signed by the owner, showing the ownership, name of business and the address of the lot location as they appear on the initial application must be submitted. **Auctions** will be required to submit a \$50,000 bond which is not included in this packet. Call the office for a copy of the auction bond. Coverage shall be kept in force at all times with no lapse in coverage during

the period of licensure. **A lapse in coverage will result in automatic revocation of your license.**

8. Current Certificate of Incorporation for the corporation issued by the Oklahoma Secretary of State's Office if your dealership is corporately owned or a current Certificate of Limited Liability Company if your dealership is owned by an LLC. A current Certificate of Good Standing issued by the Oklahoma Secretary of State is also acceptable.

9. Photos of Sales Office and Sales Lot. Your business must meet local zoning or other municipal requirements. Your place of business must be a permanent structure **separate and apart** from any residence or other type of business including any other used motor vehicle dealer's location. Your facility must have access to a restroom for the public.

10. Photo of Business Sign permanently mounted. Your sign must reflect the name of your business exactly as it appears on the initial application. It must be at least 32 square feet in size, be permanently mounted, have permanent lettering, and visible from the nearest roadway.

11. Letter or permit from the city or county where business is to be located showing approval of local zoning requirements for this type of business. If there are no zoning requirements for your location, you will need to submit a letter from the appropriate authority stating such.

12. Proof of a usable phone listed with local directory assistance in the name of the business exactly as it appears on your initial application at the location to be licensed.

13. Sample copies of all condition of sale documents for Commission approval. You will be given sample copies of approved forms at the Education Program. If you wish to use other forms, they must be submitted to the Commission for approval before you use them.

14. Inspection and approval of the location by a Commission investigator. This will be done after the Board of Commissioners meet.

15. Attendance of the Education Program by the sole proprietor, one partner, one corporate officer, or one member of the LLC as listed on the initial application is mandatory. See the enclosed information sheet.

◆◆**NOTE TO FELONY APPLICANTS**◆◆ You must submit certified copies of the Judgement & Sentence documents for each conviction and a current OSBI report. The information on your conviction shall be submitted at the same time as your application. You will need to schedule a personal interview with the Director of the Commission prior to your personal appearance before the Board of Commissioners. For this reason your application process may take longer.

All sales personnel are required to be licensed. A salesperson's license does not entitle a salesperson to buy and sell vehicles as a dealer under the dealer's license. For example, if the person is an independent contractor, using his/her own funds to buy and sell vehicles, or if the person is not under the supervision or authority of the dealer, he/she is not a salesperson, but is in fact a dealer and must have his/her own used dealer's license. To qualify for license the individual must be a bona fide employee of the dealership. The licensing requirements consist of:

16. Salesperson's initial application fee of \$25.00 each.

17. Salesperson's application completed in full, signed by the applicant and the employing dealer.

18. Copy of current Oklahoma Driver's License.

19. \$1,000 Salesperson's bond properly executed by the bonding agent and signed by the salesperson.

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INITIAL APPLICATION FOR USED MOTOR VEHICLE DEALER'S LICENSE

The information required on this form pertains to eligibility for issuance of a used motor vehicle dealer's license. Failure to provide information or material misrepresentation is grounds for denial or subsequent revocation of license or \$1,000.00 fine.

SECTION ONE:

DEALERSHIP NAME _____ PHONE (____) _____
PHYSICAL ADDRESS OF DEALERSHIP _____ CITY _____ COUNTY _____
(If rural route, please attach directions)
MAILING ADDRESS _____ CITY _____ ZIP _____

SECTION TWO: TYPE OF OWNERSHIP (CHECK ONE AND COMPLETE ALL OF THE INFORMATION BELOW)

SOLE PROPRIETOR _____ PARTNERSHIP _____ CORPORATION _____ LIMITED LIABILITY COMPANY (L.L.C.) _____
LIMITED PARTNERSHIP (L.P.) _____ LIMITED LIABILITY PARTNERSHIP (L.L.P.) _____

ENTITY NAME (IF ANY) _____

◆◆ If the entity is a Corporation, please designate the office held after each member's name. (PRES, VP, SEC, TREAS) ◆◆

OWNER/MEMBER _____ DATE OF BIRTH _____ SSN _____
HOME ADDRESS _____ CITY _____ ZIP _____ HOME PHONE _____
OWNER/MEMBER _____ DATE OF BIRTH _____ SSN _____
HOME ADDRESS _____ CITY _____ ZIP _____ HOME PHONE _____
OWNER/MEMBER _____ DATE OF BIRTH _____ SSN _____
HOME ADDRESS _____ CITY _____ ZIP _____ HOME PHONE _____
OWNER/MEMBER _____ DATE OF BIRTH _____ SSN _____
HOME ADDRESS _____ CITY _____ ZIP _____ HOME PHONE _____
OWNER/MEMBER _____ DATE OF BIRTH _____ SSN _____
HOME ADDRESS _____ CITY _____ ZIP _____ HOME PHONE _____

◆◆ IF THE DEALERSHIP IS CORPORATELY OWNED, PLEASE COMPLETE THE FOLLOWING: ◆◆

MAJORITY STOCKHOLDER _____ DATE OF BIRTH _____ SSN _____
HOME ADDRESS _____ CITY _____ ZIP _____ HOME PHONE _____
OKLAHOMA SERVICE AGENT _____
ADDRESS _____ CITY _____ ZIP _____

Have any of the applicants listed in Section Two ever been convicted of or pled guilty or "no contest" to a felony? YES _____ NO _____

◆◆NOTE◆◆ If yes, please explain on an attached sheet, include the date of conviction or plea, offense, court of jurisdiction, and disposition. You must submit certified copies of the Judgement & Sentence documents for each conviction and a current OSBI report. The felony applicant will be required to schedule a personal interview with the Director of the Commission prior to the applicant's personal appearance before the Board of Commissioners. For this reason the entire application process may take longer.

THE EDUCATION PROGRAM

A program conducted by the Used Motor Vehicle and Parts Commission in conjunction with representatives of the Department of Consumer Credit will be given to all used dealer applicants, wholesale dealer applicants, and rebuilder applicants. **ATTENDANCE IS MANDATORY. YOUR LICENSE WILL NOT BE ISSUED UNTIL YOUR ATTENDANCE IS VERIFIED.** There will be one class held from 9:00 a.m. - 12:30 p.m. on the Monday prior to the monthly meeting of the Used Motor Vehicle and Parts Commission at 2401 NW 23rd Street, Suite 57 (Shepherd Mall), Oklahoma City, Oklahoma. You must call (405)521-3600 Monday - Friday between the hours of 8:30 a.m. - 4:30 p.m. to **make your reservation for the education program.** Space is limited.

The program will present and explain forms, titles and tags and discuss the statutes relating to contracts and consumer credit as they apply to the used motor vehicle business.

2011 COMMISSION MEETING SCHEDULE

<u>Submittal Deadline</u>	<u>Education Program</u>	<u>Commission Meeting</u>
Friday, January 7	Monday, January 10	Tuesday, January 18
Friday, January 28	Monday, February 7	Tuesday, February 8
Friday, February 25	Monday, March 7	Tuesday, March 8
Friday, April 1	Monday, April 11	Tuesday, April 12
Friday, April 29	Monday, May 9	Tuesday, May 10
Friday, June 3	Monday, June 13	Tuesday, June 14
Friday, July 1	Monday, July 11	Tuesday, July 12
Friday, July 29	Monday, August 8	Tuesday, August 9
Friday, September 2	Monday, September 12	Tuesday, September 13
Friday, September 30	Monday, October 10	Tuesday, October 11
Friday, October 28	Monday, November 7	Tuesday, November 8
Friday, December 2	Monday, December 12	Tuesday, December 13

2012 COMMISSION MEETING SCHEDULE

<u>Submittal Deadline</u>	<u>Education Program</u>	<u>Commission Meeting</u>
Friday, December 30	Monday, January 9	Tuesday, January 17
Friday, February 2	Monday, February 13	Tuesday, February 14
Friday, March 2	Monday, March 12	Tuesday, March 13
Friday, March 30	Monday, April 9	Tuesday, April 10
Friday, April 27	Monday, May 7	Tuesday, May 8
Friday, June 1	Monday, June 11	Tuesday, June 12
Friday, June 29	Monday, July 9	Tuesday, July 10
Friday, August 3	Monday, August 13	Tuesday, August 14
Friday, August 31	Monday, September 10	Tuesday, September 11
Friday, September 28	Monday, October 8	Tuesday, October 9
Friday, November 2	Monday, November 12	Tuesday, November 13
Friday, November 30	Monday, December 10	Tuesday, December 11

FINANCIAL STATEMENT

NOTE: All information on this financial statement is **CONFIDENTIAL**. It will not be disclosed to anyone outside this agency

Name of business _____ Lot address _____ City _____

This financial statement is required because I am a: (Please check one)

- sole proprietor
 partner
 member of LLC
 corporate officer
 majority stock holder

Name _____ Home Phone (____) _____

Residence Address _____ City _____ ST _____ Zip _____

Flooring/Financing Organization _____

(Bank Name and Address)

Account Number _____ Person(s) authorized to draft/sign on the account _____

ASSETS		LIABILITIES	
List Banks and Account Numbers	AMOUNT		AMOUNT
Checking		Notes Payable to Relative/Friends (attach list)	
Savings		Notes Payable to Banks (attach list)	
Floor Plan Credit Line		Accounts and Bills Payable	
Cash on Hand		Chattel Mortgages	
Stocks and Bonds (attach list)		Credit Cards Payable	
Notes Receivable (attach list)		Income Tax Payable	
Accounts Receivable (attach list)		Other Unpaid Taxes and Interest	
Real Estate owned (attach list)		Amounts Payable to Others (Secured)	
Mortgages & Contracts owned (attach list)		Amounts Payable to Others (Unsecured)	
Auto: Year Make		Mortgages & Liens on Real Estate	
Auto: Year Make		Court Ordered Payments	
Auto: Year Make		Judgements Outstanding	
Personal Property			
Other Assets (attach itemized list)			
Total Assets		Total Liabilities	

Net Worth (Assets minus Liabilities): \$

MONTHLY INCOME	Amount	CONTINGENT LIABILITIES	Amount
Salary		As Guarantor, Endorser and/or Co-Signer	
Salary Source		On Discounted Paper, Leases or Contracts	
Bonus and Commissions		On Surety Bonds	
Dividends		Lawsuit or Other Liabilities (Specify)	
Real Estate Income			
Other Income (list amounts and sources)			
Total			

Other Business Interests: _____

GENERAL INFORMATION

1. Are any assets pledged or mortgaged other than shown previously on this statement? YES NO (If yes, please explain) _____

2. Has the undersigned been a defendant in any lawsuits or legal actions regarding financial matters within the last five Years? YES NO (If yes, please explain) _____

3. Has the undersigned ever filed for bankruptcy? YES NO (if yes, give the name(s) it was filed under, where it was filed and what happened. You must attach copies of the documents and court papers.) _____

4. Are you solvent in the sense your assets exceed your liabilities and in the sense that you can meet your obligations as they become mature? YES NO

CERTIFICATION

I certify that this financial statement represents my true financial status as of this date, and I hereby authorize investigation of my financial records and other sources as necessary for licensing.

Date

Signature

STATE OF OKLAHOMA
USED MOTOR VEHICLE AND PARTS COMMISSION

USED MOTOR VEHICLE DEALER'S SURETY BOND

Bond Number _____

KNOW ALL BY THESE PRESENTS, that _____

_____ 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 to the State of Oklahoma and severally to such persons who shall have any right of action under the conditions of this bond against said Principal in its capacity as a used motor vehicle dealer in the penal sum of **Fifteen Thousand Dollars (\$15,000.00)**, for the payment of which sum, well and truly to be made, we hereby jointly and severally bind ourselves, our heirs, administrators, executors, successors and assigns.

WHEREAS, the above-named Principal is applying for a license as a used motor vehicle dealer,

AND WHEREAS, said Principal is required by law to submit a good and sufficient surety bond, conditioned as set forth below, with said application for license,

THE CONDITION OF THIS OBLIGATION is such that if the Principal shall conduct its business as a used motor vehicle dealer without practicing fraud or making fraudulent representations, and without violating any of the provisions of the Oklahoma Used Motor Vehicle Dealer Laws (47 O.S. § 581 et seq.) or any amendments thereto, and if the Principal shall indemnify and reimburse any person for any loss or damage suffered by reason of said fraud, fraudulent representations or otherwise by the issuance of a certificate of title by the Principal, then this obligation shall be void; otherwise to remain in full force and effect.

IT IS UNDERSTOOD AND AGREED that the above obligation shall inure to the benefit of any person, whether a consumer, used motor vehicle dealer or used motor vehicle auction, but shall not extend to financial institutions or parties extending floor plans or financing for the dealer's inventory.

IT IS FURTHER UNDERSTOOD AND AGREED that the above obligation shall extend, without notification to the Surety, to any change of officers of the Principal if the Principal is a corporation, to any additional locations or changes of address of the Principal or to any substitution of business name of the Principal wherein ownership is not changed.

IT IS FURTHER UNDERSTOOD AND AGREED that the liability of the Surety hereunder shall, in no event, exceed the amount of this bond and that the Surety shall have the right to cancel the bond upon the giving of thirty (30) days written notice of cancellation to the Principal and the Used Motor Vehicle and Parts Commission.

DATED EFFECTIVE this _____ day of _____, _____.

Principal

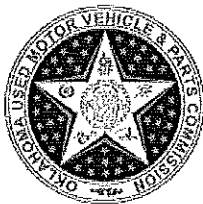
BY: _____

Surety

BY: _____

47 O.S. § 583(B) All bonds and licenses issued under the provisions of this act shall expire December 31.

UD



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www.umvpc.ok.gov

CERTIFICATE OF INSURANCE

I, _____, HEREBY CERTIFY THAT

(Name of Insurance Company) (Address of Insurance Company)

HAS ISSUED A MINIMUM OF **\$25,000** COMBINED **SINGLE LIMIT LIABILITY** INSURANCE COVERAGE ON ALL VEHICLES OFFERED FOR SALE OR USE IN ANY OTHER CAPACITY IN DEMONSTRATING OR UTILIZING THE STREETS AND ROADWAYS, IN ACCORDANCE WITH THE FINANCIAL RESPONSIBILITY LAWS OF THIS STATE [Title 47 Section 583(F)] TO THE FOLLOWING DEALER:

OWNERSHIP _____

dba DEALERSHIP NAME _____

LOT ADDRESS _____

POLICY NUMBER _____ EFFECTIVE DATE _____

AND I DO CERTIFY THAT COVERAGE AS ABOVEMENTIONED SHALL BE **CONTINUOUS** UNTIL NOTIFICATION. FURTHER, THE AFOREMENTIONED POLICY WILL NOT BE CANCELED UNTIL THIRTY (30) DAYS AFTER THE USED MOTOR VEHICLE AND PARTS COMMISSION HAS RECEIVED WRITTEN NOTICE OF THE INTENT TO CANCEL SUCH POLICY.

DATE _____ SIGNED _____

AGENCY NAME _____ AGENCY NUMBER _____

ADDRESS OF AGENCY _____ PHONE _____