



STATE OF MICHIGAN  
JOCELYN BENSON, 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 signed within 90 days of receipt of application by the zoning authority.
4. Municipality Approval Form signed within 90 days of receipt of application by the municipality authority.
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 Background Check Request (RI-030).
9. A chart of application requirements for each classification, which is on the back of this letter.

Effective March 20, 2019, all applicants requesting an original used or second-hand vehicle license (Class B) must have attended pre-licensing dealer training within a 6-month period prior to the application date. The dealer training schedule can be found on our website at [www.Michigan.gov/DealerTraining](http://www.Michigan.gov/DealerTraining).

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, 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](mailto: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

Enclosures  
(Rev. 03/2019)

# 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

\_\_\_\_\_  
Signature of Dealer Principal or Authorized Agent of Principal

\_\_\_\_\_  
Print or Type Name of Witness to Principal

\_\_\_\_\_  
Print or type Name and Title of Person Signing for Principal

\_\_\_\_\_  
Signature of Witness to Attorney-in-Fact

\_\_\_\_\_  
Name of Surety Company

\_\_\_\_\_  
Print or Type Name of Witness to Attorney-in-Fact

\_\_\_\_\_  
Signature of Attorney-in-Fact

\_\_\_\_\_  
Signature of Licensed Resident Insurance Agent

\_\_\_\_\_  
Print or Type Name of Attorney-in-Fact

\_\_\_\_\_  
Print or Type Name of Resident Insurance Agent

**NOTICE:** Vehicle Dealer License Applicant, Surety Bonding Companies and Agents –

**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.



**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, Licensing Unit, 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.)

## Michigan Department of State - Dealer Selection for Designated Branch Offices

**(Please complete all sections of this form)**

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

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.

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

Return to: Michigan Dept. of State, Business Licensing Section **(email as an attachment to [licensing@michigan.gov](mailto:licensing@michigan.gov))**.

If you do not have access to email, please fax to 517-335-2810.

# ORIGINAL VEHICLE DEALER LICENSE APPLICATION

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 and e-mail address are required for licensure)**

Telephone ( ) Fax ( ) E-mail 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  
 CLASS B - Used Vehicle Dealer\* CLASS G - Vehicle Salvage Pool  
 CLASS C - Used Vehicle Parts Dealer  
 CLASS D - Broker (Not compatible with Classes A or B) CLASS R - Automotive Recycler  
 CLASS E - Distressed Vehicle Transporter CLASS W - Wholesaler

\*(Requires Prelicensure Training)

6. **FRANCHISE AGREEMENT OR BONAFIDE CONTRACT** (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 (attach a separate sheet if necessary)**

FULL NAME HOME ADDRESS (Street) CITY/STATE/ZIP DATE OF BIRTH

SOCIAL SECURITY NUMBER DATE OF PRELICENSURE TRAINING (REQUIRED FOR CLASS B DEALERS ONLY)

FULL NAME HOME ADDRESS (Street) CITY/STATE/ZIP DATE OF BIRTH

SOCIAL SECURITY NUMBER DATE OF PRELICENSURE TRAINING (REQUIRED FOR CLASS B DEALERS ONLY)

FULL NAME HOME ADDRESS (Street) CITY/STATE/ZIP DATE OF BIRTH

SOCIAL SECURITY NUMBER DATE OF PRELICENSURE TRAINING (REQUIRED FOR CLASS B DEALERS ONLY)

FULL NAME HOME ADDRESS (Street) CITY/STATE/ZIP DATE OF BIRTH

SOCIAL SECURITY NUMBER DATE OF PRELICENSURE TRAINING (REQUIRED FOR CLASS B DEALERS ONLY)



---

---

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**

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

NO      YES

If YES, give dealer number and name:

---

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

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

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

---

12. **FEES**

A. License fee - All classes except C and R	\$75.00	\$ _____
		OR
B. License fee - Class C and Class R	\$160.00	\$ _____
C. Dealer plate fees (Only Class A, B, W are eligible) (Class A & Class B require a minimum of 2 plates)	\$10.00 for each plate	\$ _____
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 within the 6 months period preceding the date of the application, the applicant, the partners of the applicant, or the principal officers of the applicant, as applicable, completed the prelicensure dealer training program as required by MCL 257.2481(2).

I/we hereby certify that each retail sales location will have a designated employee that has completed the dealer training program required under section MCL 257.2481(3) or (5) as applicable within 90 days of the license issuance. A single individual may not be the designated individual for more than 3 locations.

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 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 signed within 90 days of receipt of application by the zoning authority.

A completed municipality approval form for all license classifications being applied for signed within 90 days of receipt of application by the municipality authority.

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 Livescan Fingerprint Background Check Request (RI-030) for each applicant listed in section 8.

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 any or all owned vehicles 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.

An original copy of a 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 submitting an incomplete application will delay the processing of your dealer license application.**

**Please allow 30 days from receipt of completed application for processing.**