MVD-10781 REV. 02/17



New Mexico Taxation & Revenue Department - Motor Vehicle Division

Application for Dealer License Renewal Business Information





-- Renewals Can Be Completed Online in MyMVD or --Mail completed form to: 505 Marguette, NW Suite 1501, Albuquergue, NM 87102

| | • | Busines | ss Inf | ormatic | on | | | | |
|--|----------------------|---------------|--------------------|-------------|----------------------|---------------|-------------------|------------|------------------|
| 1. License # | 2. License Expiratio | | | | Business Entity or (| Owner | | | |
| | | ,, | <u> </u> | | ())(C) (| | | | |
| 4. New Mexico Tax ID# (CRS) | 5. Federal Tax ID 7 | # | 6. Mail | ing Addres | s (may differ from b | ousine | ss add | ress) | |
| 7. City | | | 8. | County | | 9. Sta | ate | | 10. Zip Code |
| | | | | - | | | | | |
| 11. Ownership Type | | | | | Dealer Education F | Require | ements | | |
| Proprietorship Corporation LLC PLE/CE Certificate # Date 13. NMSOS SCC# | | | | | | | | | |
| Partnership Su | ub-S Corp | Trust or E | Estate | 1 | rtnership# | | | | |
| 14. License for: | 15. Type of Vehicle | e Sold | | | | | | | |
| Retail Dealer | 🗋 Car / Truck | | | Used | Snowm | obile | _ | New | 🗋 Used |
| Boat UNew | | | | Used | 🔲 Jet Ski | | | New | Used |
| Manufacturer | | New | | | Trailer | | | New New | 🗋 Used 🗋 Used |
| | Motorcycle | | | Used | | | | new | Used |
| | | Primary | Lot Ir | nformat | | | | | |
| 16. Doing Business As (DBA) Na | ime | | | | 17. Business Telep | ohone | # | 18. B | usiness Fax # |
| 19. Physical Business Street Add | Iress | | | | | | | | |
| | | | | | | | | | |
| 20. City | | | 2 | 1. County | | 22. S | tate | | 23. Zip Code |
| | | | | | | | | | |
| 24. Preferred Contact Person25. Telephone #26. Business E- | | | ess E-Mail Address | | | of Veh | nicles st Year | | |
| | Supr | olemental | loca | tion Info | ormation | | | | |
| Please atta | | | | | | litiona | l locat | ion. | |
| Please attach a separate sheet with all requested information for each add 28. Doing Business As (DBA) Name 29. Business Telep | | | | | | usiness Fax # | | | |
| | | | | | | | | | |
| 31. Physical Business Street Add | lress | | | | | | | | |
| 32. City | | | 2 | 2 County | | 34. S | tato | | 35. Zip Code |
| SZ. Olly | | | 3. | 3. County | | 04. 0 | laie | | 33. Zip Code |
| 36. Preferred Contact Person 37. Telephone # 38. Business E-Mail Address 39. # of Veh | | | | nicles | | | | | |
| Sold Last Year | | | | | | | | | |
| | | | | rmation | | | | | |
| | Bor | nd Underwriti | ing Co | mpany Inf | ormation | | | | |
| 40. Name of Bond Underwriter | | | | | | 41. B | usines | s Telep | phone # |
| 42. Mailing Address | | | 43 | 43. City | | 44. State | | | 45. Zip Code |
| | | | | | | | | | |
| | | Bond Ag | jency l | nformatio | n | | | | |
| 46. Name of Bond Insurance Age | ency | | | | | 47. B | lusines | s Telep | ohone # |
| 48. Mailing Address | | | 4 | 9. City | | 50. S | tate | | 51. Zip Code |
| | | | | | | | | | · |
| | | Bon | - | mation | | | | | |
| 52. Bond # | 53. Amount | | 54. Re | newal Start | t Date | 55. R | lenewa | II End I | Date |

-- Renewals Can Be Completed Online in MyMVD or --

Mail completed form to: 505 Marquette, NW Suite 1501, Albuquerque, NM 87102

| Business Information | | | | | | | | | |
|--|---|--|--|-----------|--|--|--|--|--|
| 1. L | 1. License # 3. Legal Name of Business Entity or Owner | | | | | | | | |
| | | | | | | | | | |
| A. | A. Any and all changes concerning the dealership licensing requirements must be submitted to the Dealer Licensing Bureau (DLB) and must be acceptable to the Dealer Licensing Bureau. Changes include but are not limited to: changes in ownership, changes of business partners, change of location, adding a Supplemental Lot, mailing address, phone numbers, fax numbers, email, tax ID numbers, or your bonding company pursuant to Section 66-4-2 NMSA 1978 Department to Issue License. All changes can be submitted online in MyMVD. | | | | | | | | |
| B. | . Bond receipt <u>MUST</u> be submitted to the Dealer Licensing Bureau at 505 Marquette NW , Suite 1501 , Albuquerque , NM 87102 , within 10 business days of payment. If changing bonding companies during the license year, a NEW ORIGINAL BOND must be submitted. Any lapse in coverage could result in your license being suspended or revoked. Submit proof that bond is continous with license period, e.g. April 1 to March 31. | | | | | | | | |
| C. | C. Any seller or transferor, including a dealer, of a vehicle required to be registered pursuant to the Motor Vehicle Code shall furnish to the purchaser upon delivery the necessary title, properly assigned, and shall inform the purchaser that application for transfer must be filed with the department within thirty (30) days of the date pursuant to Section 66-3-107 NMSA 1978 Duties of Seller or Transferor; Additional Duties of Dealers; Application for Registration; Penalty; Mileage of Vehicle. | | | | | | | | |
| D. | | corporate officer or operating agent has been of the first issuance or subsequent renewal(s) of t | convicted of a felony related to the use, sale or exchan his business license. | nge | | | | | |
| E. | APPLICANT QUESTIC | DNS | YES NO | | | | | | |
| | Has the applicant, any partner, corporate officer or operating partner ever been denied, had revoked or suspended a dealer, manufacturer, wholesaler, distributer, auto recycler or title service (partner) license in New Mexico or any other state? | | | | | | | | |
| | Has the applicant, any partner, corporate officer or operating partner ever been arrested, charged with, convicted ofor plead no contest to any felony or misdemeanor/crime, within the past ten (10) years, excluding minor traffic violations? | | | | | | | | |
| | • Has the applicant or | r any partner of said applicant ever had a moto | | | | | | | |
| | partner license subject to denial or disciplinary actions in any state? Has the applicant or any partner of said applicant ever had any other type of occupational license | | | | | | | | |
| | (excluding driver license) subjected to denial or disciplinary action? Has the applicant, any partner, corporate officer or operating agent have a financial interest in any motor vehicle dealer/auto recycler/partner license in this or any other state? | | | | | | | | |
| F. | F. This business maintains at its place of business the records of the following transactions for at least three (3) full calendar years: Every vehicle of a type subject to registration under the Motor Vehicle Code, which is bought, sold, or exchanged by the licensee or received by the licensee for the sale or exchange. Every motor vehicle body, chassis or engine which is sold or otherwise disposed of. Every vehicle that is bought or otherwise acquired and dismantled by the licensee. | | | | | | | | |
| Applicant/owners (who operates as an individual proprietorship, or as representative of an organization as a partner, corporate | | | | | | | | | |
| officer, general or limited partner, member or operating agent) hereby authorizes the New Mexico Taxation and Revenue Department (TRD) and any law enforcement agencies at its request to conduct a background investigation into my character, credit history, criminal history, employment history, motor vehicle operator's history, and tax compliance history. | | | | | | | | | |
| I swear or affirm under penalty of perjury that the information I have provided in this document is true and correct to the best of my knowledge and belief. I swear that I am the owner, partner, corporate officer, general or limited partner, member, or operating agent of the business named above, that I have the authority to bind the business or individual proprietorship named above as to any representations made in this application, and that all statements made herein are true and correct to the best of my knowledge. I hereby acknowledge that any changes to the above information throughout the term of my licensure are subject to approval by the Taxation and Revenue Department, Motor Vehicle Division, Dealer Licensing Bureau. | | | | | | | | | |
| G | Applicant Full Name | H | I pplicant Signature Date | | | | | | |
| | State of New Mexico | гппеа/туреа Р | pplicant Signature Date | | | | | | |
| | County of | | | | | | | | |
| K. | Acknowledgement: On the known to me or identified thro the purposes herein. | day of (mor ough satisfactory evidence, appeared to me and indi | th) of, the above named person, either personall cated that he/she signed the foregoing document voluntarily | ly for | | | | | |
| L | | N. | | | | | | | |
| | - | ire of Notarial Official | | | | | | | |
| M. My Commission Expires Place Notary Seal or Stamp Here | | | | | | | | | |

-- Renewals Can Be Completed Online in MyMVD or --

Mail completed form to: 505 Marquette, NW Suite 1501, Albuquerque, NM 87102

| | | Business I | nformation | | | | | |
|--|---|--------------------------------|----------------------|------------|--|-----------------------|-------------|--|
| 1. License Number 3 | . Legal Name | e of Business Entity or | Owner | | | | | |
| | E | ntity Owner App | olicant Verifica | ation | | | | |
| 56. Ownership Type 5 | | ne of Owner Entity - no | | | s name | | | |
| Corporation, incl. Sub-S | 8. Contact Pe | erson Name | 59. Telephone Number | | | 60. % Owned by Entity | | |
| Trust or Estate Partnership | | | | | | | | |
| Other (attach explanation) | 1. Entity Add | ress | | | | | | |
| 62. City | | | 63. County | | 64. State | 65.2 | Zip Code | |
| | Indi | vidual Owner A | pplicant Infor | mation | 1 | | | |
| 66. Last Name | | | 67. First Name | | | | 68. MI | |
| 69. Business Title | | 70. % Owned | 71. Physical Home | Address | | | | |
| 72. City | | I | 73. County | | 74. State | 75.2 | Zip Code | |
| 76. Driver License Number | | 77. State of Issuance | 78. Date of Birth | 79. Reside | nce Telephor | ne # (not a | business #) | |
| | Indi | vidual Owner A | pplicant Infor | mation | | | | |
| 66. Last Name | | | 67. First Name | | | | 68. MI | |
| 69. Business Title | e 70. % Owned 71. Physical Home Address | | | | | | | |
| 72. City | | | 73. County | | 74. State | 75. | Zip Code | |
| 76. Driver License Number | | 77. State of Issuance | 78. Date of Birth | 79. Reside | nce Telephor | ne # (not a | business #) | |
| | Indi | vidual Owner A | pplicant Infor | mation | | | | |
| 66. Last Name | | | 67. First Name | | | | 68. MI | |
| 69. Business Title | | 70. % Owned | 71. Physical Home | Address | | | | |
| 72. City | | I | 73. County | | 74. State | 75.2 | Zip Code | |
| 76. Driver License Number | | 77. State of Issuance | 78. Date of Birth | 79. Reside | nce Telephor | ne # (not a | business #) | |
| | Indi | vidual Owner A | pplicant Infor | mation | | | | |
| 66. Last Name | | | 67. First Name | | | | 68. MI | |
| | | | | | | | | |
| 69. Business Title | | 70. % Owned | 71. Physical Home | e Address | <u>. </u> | | | |
| 72. City | | | 73. County | | 74. State | 75.2 | Zip Code | |
| 76. Driver License Number | | 77. State of Issuance | 78. Date of Birth | 79. Reside | nce Telephor | ne # (not a | business #) | |

Application for Dealer License Renewal - Applicant Affidavit

-- Renewals Can Be Completed Online in MyMVD or --

Mail completed form to: 505 Marquette, NW Suite 1501, Albuquerque, NM 87102

General Instructions

- These are the forms required by the Taxation and Revenue Department-Motor Vehicle Division-Dealer Licensing Bureau to apply for a renewal of a current Dealer License.
- **PLEASE NOTE:** There are separate renewal applications for Dealer and Auto Recycler Licenses. Please be sure you use the correct one for each license and use the correct number for each business.
- Please submit your application in a timely manner, prior to expiration of current license. This will assist your customers who have purchased vehicles to have a smooth transaction when titling and registering their vehicles.
- Follow all instructions and read all notes contained in this document. All information will be compared to the current Dealer Licensing Bureau records for consistency and accuracy. A License will not be issued until all discrepancies are corrected. An incomplete or inaccurately completed application could delay or jeopardize processing, approval and issuance of your license renewal.
- The Dealer Licensing Bureau does routine background tax checks on all owners and on other businesses in which they have an ownership interest. If we find that any tax payments are not current, or that any owners or their businesses are not currently in good standing with the New Mexico Taxation and Revenue Department (TRD) or the Secretary of State (SOS), additional documentation will be required.
- If you have any questions regarding this application, please contact the New Mexico Motor Vehicle Division's Dealer Licensing Bureau at (505) 383-2316.

License Renewal Checklist

If a box does not apply to you or your business operations (Ex: no supplemental lot) please mark N/A signifying not an applicable response. Please use this as your checklist to make sure you have included all materials and completed all applicable sections.

| | ר | Please fill form | online, prin | t clearly or type | e. All boxes mu | st be filled in. |
|--|---|------------------|--------------|-------------------|-----------------|------------------|
|--|---|------------------|--------------|-------------------|-----------------|------------------|

This document must be signed by the owner or responsible officer/agent (see page 2, letters G through I), and must be properly notarized (see page 2, letters J through N). The signature will be accepted as valid only if the signer's information is completed in the Individual Owner Applicant Information section on Page 3.

If you are exempt from taxes or CRS#, please attach government document attesting to that fact.

☐ Make copies of this application for your records. The Dealer Licensing Bureau (DLB) will not make copies for you.

VERIFICATION DOCUMENTS - Provide clear copies of the following documents for the license renewal period:

A Dealer Continuing Education Certificate is required for non-franchise dealers every two (2) years...

- Business License(s)/documents for primary and supplemental locations, i.e. license, registration, permit or letter issued by local government agency.
- Bond receipt(s) for the renewal year include receipts for separate bonds for any and all supplemental locations. Submit one type of acceptable receipt as specified in instruction #55 on page 6.
- **\$50.00** renewal application fee (check or money order only, payable to MVD).

Page 4 of 7

Send completed packet to the address at the top.

-- Renewals Can Be Completed Online in MyMVD or --

Mail completed form to: 505 Marquette, NW Suite 1501, Albuquerque, NM 87102

Page 1 Business Information

- 1. Enter the license number issued to you by the Dealer Licensing Bureau (DLB).
- 2. Enter license expiration date.
- 3. Enter the business name or entity. If business name is a proprietorship, enter the individual's name: first, middle initial and last name. If partnership enter business name.
- 4. Enter Tax number (CRS#) issued to you by the New Mexico Taxation and Revenue Department.
- 5. Enter Federal ID Number (FEIN) issued to you by the federal government. DO NOT enter a Social Security Number (SSN). This is required for all entities except sole proprietorships that have no employees.
- 6. Enter address at which the business will receive mail from the DLB.
- 7. City where your mailing address is located.
- 8. County where your mailing address is located.
- 9. State where your mailing address is located.
- 10. Zip code where your mailing address is located.
- 11. Check the type of ownership for your business (choose only one).
- 12. Enter PLE/CE Certificate Number and Certificate Date (month and year) for used car dealers only.
- 13. **ALL corporation and partnership types** enter the SCC# or partnership# issued by the New Mexico Secretary of State (SOS).
- 14. What is your dealership licensed as?
- 15. Please identify the types of vehicles to be sold. This is reflected on your license. Note: Mark NEW only if you buy directly from, and have a sales agreement with a manufacturer or distributor.

Page 1 Primary Lot Information

Primary location will be the first location your business applied to be licensed.

- 16. This will be the name that appears on your sign.
- 17. Enter a **RELIABLE** business number where the DLB will be able to contact you.
- 18. Enter a **RELIABLE** business fax number where the DLB will be able to contact you.
- 19. Address where business is physically located.
- 20. City where business is physically located.
- 21. County where your business is physically located.
- 22. State where your business is physically located.
- 23. Zip code where business is physically located.
- 24. The person in your office with whom the DLB can discuss all issues pertaining to your license including sensitive tax issues.
- 25. **RELIABLE** telephone number for the preferred contact person.
- 26. **RELIABLE** business e-mail for the preferred contact person.
- 27. State number of vehicles your dealership sold in the previous license year. This number determines how many dealer plates your business is entitled to by law.

Page 1 Supplemental Lot Information

- 28-39 follow the same instructions as 16-27 for each location.
 - See page 4, License Renewal Checklist, VERIFICATION DOCUMENTS.
 - If you do not have more than one location, please mark this section N/A.
 - If you closed a supplemental lot and have not already notified the DLB, please provide a letter stating which lot is closed, including the address and the date it was closed.

Mail completed form to: 505 Marquette, NW Suite 1501, Albuquerque, NM 87102

Page 1 Bond Information

- 40. The name of the Bond Insurance Company that carries your bond (Western, CNA, Sentry, Fidelity, etc.)
- 41. Bond Insurance company's business telephone number.
- 42-45. Bond Insurance company's mailing address, city, state and zip code.
- 46. The name of the Bond Insurance Agency from which you purchased your bond (Ex. Ashton, Garcia, Tooter Cosper etc.)
- 47. Insurance agent's business telephone number.
- 48-51. Bond Insurance agent's mailing address, city, state and zip code.
- 52. The number on your dealer bond.
- 53. The amount of your bond (Ex: vehicles, trailers, RVs, ATVs \$50,000- Motorcycles only \$12,500.)
- 54. Please enter the date your bond renews for this year, **NOT** the date the bond was first written. All bonds must be continuous with license period.
- 55. Please enter the date your bond ends for current renewal year. Do not write "continuous." (This date could also be called "anniversary date.") All bonds must be continuous with license period. This date may be referenced on your invoice.
 - DO NOT submit a copy of original bond as proof of bond payment.
 - Submit newly purchased original bonds, signed on principal line. Bond must be concurrent with license period. See Applicant Affidavit, page 2, letter B.
 - Choose one of the acceptable proofs of renewal payment listed below:
 - A receipt from the bond company stating: business name, bond number, and current renewal effective beginning and ending dates.
 - A copy of the front and back of your check cashed by the bank with an invoice stating: business name, bond number and renewal effective beginning and ending dates.
 - A letter from the bond company, on their letterhead, acknowledging payment for bond and noting the business name, bond number and renewal effective beginning and ending dates.

Page 2 Business Information & Affidavit

- 1. Enter the license number issued to you by the Dealer Licensing Bureau (DLB).
- 3. Enter the business name or entity. If business name is a proprietorship, enter the individual's name: first, middle initial and last name.
- A-F Please review this information carefully, particularly the paragraph in bold print above the signature lines.
- G-I Owner or responsible executive officer must print and sign their name and date the form.
- J-N The document must be notarized.

-- Renewals Can Be Completed Online in MyMVD or --

Mail completed form to: 505 Marquette, NW Suite 1501, Albuquerque, NM 87102

Page 3 Business Information

- 1. Enter the license number issued to you by the Dealer Licensing Bureau (DLB).
- 3. Enter the business name or entity. If business name is a proprietorship, enter the individual's name: first, middle initial and last name.

Page 3 Entity Owner Applicant Information

All boxes are required for entity owner.

- **DO NOT** complete if business is a proprietorship.
- An Entity Owner is any owner that is a corporation, LLC, trust, estate, partnership or other artificial legal entity. An entity owner is NOT an individual person or sole proprietorship.
- 56. Check one box only; corporation, LLC, estate or trust, partnership, other (incl. nonprofit). **NOT** a person's name.
- 57. Enter name of corporation, LLC, trust, estate or other legal entity. May be the same as #3 on page 1.
- 58. Enter contact person name for the entity. Named contact person must be able to act on behalf of the business and discuss all issues, including sensitive tax issues.
- 59. Enter contact person's telephone number.
- 60. Enter the Entity's ownership percentage. **DO NOT** enter the contact person's percentage.
- 61-65. Street, City, County, State and Zip code for the entity. Address may or may not be the same as primary business physical location, such as out of state owners.

Page 3 Individual Owner Applicant Information

All boxes are required for each identified individual.

- 66-79 Individual Owner- Applicant Information:
 - Make copies of this page and use to complete if there are more than four individual owners for your business.
 - Repeat instructions 66–79 for each individual owner applicant and each authorized individual.
 - Applicant Information must match the DLB records.
 - ALL owner applicants with financial interest must complete this section. (Proprietors, partners, entity owners', members etc.)
 - ANY individuals authorized to act on behalf of the business must complete this section.
 - Individual owner percentages must total 100%.
 - Individual owners with 10% or less financial interest may be entered as a single group. Indicate the total number of people and the total percentage owned by them as a group. Enter the name of the entity and the Federal tax ID number for the trust, estate, nonprofit, limited partnership, etc.
- 66. Last name of individual.
- 67. First name of individual.
- 68. Middle initial of individual.
- 69. Business title.
- 70. Enter percentage amount for those with a financial interest in the business. Enter 0% for officers and individuals who have no financial interest but do have authorization to act on behalf of the business.
- 71-75. Enter a residence street, city, county, state and zip code, not a business address.
- 76. Enter driver license number
- 77. Enter state of issuance for driver license.
- 78. Enter the month/day/and year for date of birth.
- 79. The residence phone must be different than the business phone number.