



## APPLICATION FOR NAME/DBA, ADDRESS, OR DEALER LICENSE TYPE CHANGE

- APPLICATION TO CHANGE DEALER LICENSE TYPE**  
(New to used or used to new Motor Vehicle dealer's license)
- APPLICATION FOR NAME/DBA CHANGE**
- APPLICATION FOR ADDRESS**
- PO BOX CHANGE**  
(PO Box must be in the same zip code as the business)

<b>1. PLEASE PRINT LEGIBLY IN INK OR TYPE</b>			PERMIT NUMBER	PLATE NUMBER
BUSINESS NAME			BUSINESS PHONE	
DBA OR FICTITIOUS TITLE NAME			ALTERNATE TELEPHONE NUMBER	
PROPOSED NEW OR CURRENT BUSINESS STREET ADDRESS			PO BOX	
CITY	STATE	ZIP CODE	COUNTY	

**2. USING A BLACK PEN, SHADE IN A BOX IN EACH COLUMN, UNDER DEALERSHIP COUNTY, TO INDICATE THE COUNTY NUMBER IN WHICH YOUR DEALERSHIP IS LOCATED. SEE CHART BELOW FOR THE APPROPRIATE COUNTY NUMBER.**

01	ADAMS	16	COSHOCTON	31	HAMILTON	46	LOGAN	61	NOBLE	76	STARK
02	ALLEN	17	CRAWFORD	32	HANCOCK	47	LORAIN	62	OTTAWA	77	SUMMIT
03	ASHLAND	18	CUYAHOGA	33	HARDIN	48	LUCAS	63	PAULDING	78	TRUMBULL
04	ASHTABULA	19	DARKE	34	HARRISON	49	MADISON	64	PERRY	79	TUSCARAWAS
05	ATHENS	20	DEFIANCE	35	HENRY	50	MAHOINING	65	PICKAWAY	80	UNION
06	AUGLAIZE	21	DELAWARE	36	HIGHLAND	51	MARION	66	PIKE	81	VAN WERT
07	BELMONT	22	ERIE	37	HOCKING	52	MEDINA	67	PORTAGE	82	VINTON
08	BROWN	23	FAIRFIELD	38	HOLMES	53	MEIGS	68	PREBLE	83	WARREN
09	BUTLER	24	FAYETTE	39	HURON	54	MERCER	69	PUTNAM	84	WASHINGTON
10	CARROLL	25	FRANKLIN	40	JACKSON	55	MIAMI	70	RICHLAND	85	WAYNE
11	CHAMPAIGN	26	FULTON	41	JEFFERSON	56	MONROE	71	ROSS	86	WILLIAMS
12	CLARK	27	GALLIA	42	KNOX	57	MONTGOMERY	72	SANDUSKY	87	WOOD
13	CLERMONT	28	GEAUGA	43	LAKE	58	MORGAN	73	SCIOTO	88	WYANDOT
14	CLINTON	29	GREENE	44	LAWRENCE	59	MORROW	74	SENECA		
15	COLUMBIANA	30	GUERNSEY	45	LICKING	60	MUSKINGUM	75	SHELBY		

<b>Butler Co.</b>		<b>DEALERSHIP</b>	
<b>= 09</b>		<b>COUNTY</b>	
0	0	0	0
1	1	1	1
2	2	2	2
3	3	3	3
4	4	4	4
5	5	5	5
6	6	6	6
7	7	7	7
8	8	8	8
9	9	9	9

**3. FEES PAYABLE TO "TREASURER, STATE OF OHIO," ARE AS FOLLOWS: DO NOT SEND CASH**

MOTOR VEHICLE DEALER PERMIT (REQUIRED)		@ \$ 4.00	=
SALVAGE DEALER, POOL OR AUCTION PERMIT (REQUIRED)		@ \$ 2.00	=
*AMENDED REGISTRATION CARDS (REQUIRED, IF ISSUED LICENSE PLATES) (MASTER PLATE + ADDITIONAL PLATES)		@ \$2.00 each	=
*Registration card fees do not apply to DBA name changes.	<b>TOTAL FEES DUE</b>		=

**FEES ARE NON-REFUNDABLE  
BOTH SIDES OF THIS APPLICATION MUST BE COMPLETED**

**4. CHANGE OF ADDRESS APPLICANTS ONLY:**

(This does not apply to PO BOX changes)

Contact your County Auditor to determine if a new vendor's number is required.

VENDOR'S NUMBER

- A.** Are you or do you intend on sharing the proposed business location with another licensed motor vehicle dealer?  YES  NO  
If yes, indicate the business name and, if available, the permit number of the other dealer.

BUSINESS NAME

PERMIT NUMBER

**NOTE:** A certificate of compliance form, **BMV4347**, must be submitted with this application, if you answered **YES** to question 4A.

- B.** Was the proposed business location previously occupied by another licensed motor vehicle dealer?  YES  NO  
If yes, give the business name, if available.

BUSINESS NAME

- C.** Submit photographs of the proposed business location's lot, office, (inside and outside), and business sign.\*

**5. NAME/DBA CHANGE APPLICANTS ONLY:** Submit a photograph of the sign showing the business/ dba name.\*

**\*THE SIGN MUST BE IN THE EXACT BUSINESS/DBA NAME WITH AT LEAST SIX INCH LETTERS.**

**6. NEW MOTOR VEHICLE DEALERS ONLY:** Indicate below each NEW make to be sold and submit Statements of Contract, BMV4319, showing the new business name and/or new business address for each.

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**FINANCIAL RESPONSIBILITY NOTICE**

**YOU WILL LOSE YOUR DRIVER LICENSE FOR AT LEAST 90 DAYS IF YOU DRIVE WITHOUT INSURANCE OR OTHER ACCEPTABLE PROOF OF FINANCIAL RESPONSIBILITY COVERAGE**

- In Ohio, it is illegal to drive any motor vehicle without insurance or other financial responsibility (FR) coverage.
- It is also illegal for any motor vehicle owner to allow anyone else to drive the owner's vehicle without FR coverage.
- **PROOF OF COVERAGE IS REQUIRED:** • Whenever a police officer issues a traffic ticket • At all vehicle inspection stops • After certain automobile crashes and • Upon random checks by the Registrar of Motor Vehicles.
- **ANY DRIVER OR OWNER WHO FAILS TO SHOW PROOF OF INSURANCE OR OTHER COVERAGE WILL:** • Lose his or her driver license for 90 DAYS on the first offense and ONE YEAR on additional offenses • Lose his or her license plates and vehicle registration • Pay reinstatement fees of \$75.00 first offense, \$250.00 second offense, and \$500.00 any additional offense • Pay a \$50.00 penalty for any failure to surrender his or her drivers license, license plates, or registration AND • Be required to maintain special FR coverage ("High-risk" insurance or equivalent) on file with the Bureau of Motor Vehicles (BMV) for FIVE YEARS.
- **ONCE THIS SUSPENSION IS IN EFFECT:** Any driver or owner who violates the suspension will have his or her vehicle immobilized and his or her license plates confiscated for at least 30 DAYS first offense and 60 DAYS second offense. For a third or subsequent offense, the vehicle will be forfeited and sold and the person will not be permitted to register any motor vehicle in Ohio for FIVE YEARS.
- **IF YOU ARE INVOLVED IN AN ACCIDENT WITHOUT INSURANCE OR OTHER FR COVERAGE:** In addition to all the penalties listed above, you may have • A SECURITY SUSPENSION for TWO YEARS or more and • A JUDGMENT SUSPENSION for SEVEN YEARS.
- **THESE PENALTIES ARE IN ADDITION TO ANY FINES OR PENALTIES IMPOSED BY A COURT OF LAW.**
- **WARNING: THESE LAWS DO NOT PREVENT THE POSSIBILITY THAT YOU MAY BE INVOLVED IN AN ACCIDENT WITH A PERSON WHO HAS NO INSURANCE OR OTHER FR COVERAGE.**

**7. I AFFIRM THAT ALL INFORMATION PROVIDED ON THIS APPLICATION IS TRUE AND CORRECT AND THAT I, AS PROPRIETOR, PARTNER, OFFICER, MEMBER OR TRUSTEE HAVE AUTHORITY TO SIGN THIS APPLICATION.**

**X**  
SIGNATURE (OWNER, PARTNER, OFFICER, MEMBER, OR TRUSTEE)

DATE

PRINT NAME OF SIGNER

**INCOMPLETE INFORMATION WILL RESULT IN THE DELAY OF PROCESSING YOUR APPLICATION.**

Upon receipt of a completed application for change of address or dealer license type change, a physical inspection of the proposed new location will be requested. Please allow four to six weeks for processing. Applications for name/dba or PO Box change only do not require an inspection. Notice of change of status is required, in writing, within 15 days [O.R.C. 4517.23 & 4738.08].

Return completed application, all supporting documents and fees to: Ohio Bureau of Motor Vehicles, Attn: Dealer Licensing Section, P. O. Box 16521, Columbus, Ohio, 43216-6521.