



**DIVISION OF MOTOR VEHICLES**

**DEALERS' LICENSE AND REGULATION OFFICE**

600 New London Avenue, Cranston, RI 02920-3024

Phone: 401-462-5733

Fax: 401-462-5789

[www.dmv.ri.gov](http://www.dmv.ri.gov)

## INSTRUCTIONS FOR APPLICATION FOR NEW DEALERSHIP

**Instructions for applicants in making first application for dealers license application must be accompanied by all of the following documents:**

1. \* **The proposed dealership name must be approved by this department (Dealers' License and Regulation Office) prior to making application.**
2. Application, financial statement prepared by a certified public accountant (CPA) and employee forms, must be completed in full, signed and notarized and accompanied by an approved line of credit for fifty thousand dollars (\$50,000) from a financial institution, in the dealer's name.
3. \$50,000 surety bond (from insurance company) completed, signed and notarized.
4. Each owner, partner or corporate officer must complete one (1) BCI Authorization form (Bureau of Criminal Identification) for our processing.
5. Copy of formal lease agreement issued to dealership (for 1-year minimum) stating total square feet of building and outside area, etc., signed and notarized, or a copy of deed (if property is owned by the dealership.) (2,400 sq. ft. minimum building and 2,400 sq. ft. minimum outside.)
6. Copy of city/town license (second-hand license), if required, otherwise, a letter of zoning approval from city/town approving the sales of motor vehicles at that proposed dealership address.
7. Four (4) pictures of the outside of building from all angles, including entire building and lot display area.
8. **For corporation only:** Copy of articles of incorporation: copy of the minutes showing the election of all corporate officers and a copy of fictitious name report (if operating under a "DBA" name) and a letter of Good Standing from the Rhode Island Secretary of State.
9. If a franchise dealer, then you must first comply with Rhode Island General Law § 31-5.1-4.2 (Having the Manufacturer/Distributor Issue Letter(s) of Intent.) If no protests are received after the 30-day protest period, you may then file for this application. Manufacturer/Distributor must be licenses with this office.

**Upon our receipt of the above, your application will be investigated and scheduled for a hearing before our Dealer's Hearing Board. If granted a license, the following document must be received in this office within thirty (30) days in order to finalize the application and be issued a dealer's license.**

- 
10. Picture of twenty-four square foot (24 sq. ft.) size (minimum) stating the exact dealership name.
  11. **\$301.50 License Fee** (money order or check). Made payable to: "**Dealers' License & Regulation Office**".
  12. Business telephone number.
  13. Insurance filing (GU-1338) on dealer plate insurance coverage, mailed to "Financial Responsibility" office, DMV (DBA name only). The phone number is 401-462-5745.
  14. If franchise dealer, you must supply the Dealer Agreement.

\* After requirements are completed by investigator, you must make an appointment with the secretary to finalize. The phone number is 401-462-5732.

**Fax blank bill of sale to this office at 401-462-5789, for approval. Contact the Division of Taxation at 401-574-8938 for Tax forms.**

**The Division of Taxation is located at 1 Capitol Hill, Providence, RI 02908**



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS  
**DIVISION OF MOTOR VEHICLES - DEALERS' LICENSE AND REGULATION OFFICE**  
 600 New London Avenue, Cranston, RI 02920-3024  
 Phone: 401-462-5733 Fax: 401-462-5789  
 www.dmv.ri.gov

## APPLICATION FOR DEALERSHIP / RENEWAL / ANNEX / TRANSFER

USE BLUE OR BLACK INK ONLY

### DMV Official Use Only – DO NOT COMPLETE THIS SECTION

License # \_\_\_\_\_ Check # \_\_\_\_\_  
 Date Issued \_\_\_\_\_ Date Granted \_\_\_\_\_ Registration # \_\_\_\_\_

#### Dealer Information

<b>APPLICATION TYPE</b> (check one box only):		<b>DEALER TYPE</b> (check one box only):	
<input type="checkbox"/> First Dealer Application	<input type="checkbox"/> Dealer Annex Application	<input type="checkbox"/> New Vehicles Only	<input type="checkbox"/> Motorcycles/Mopeds
<input type="checkbox"/> Dealer Renewal	<input type="checkbox"/> Transfer Application	<input type="checkbox"/> Used Vehicles Only	<input type="checkbox"/> New and Used Vehicles

#### Applicant Information

CORPORATE NAME:		PRINCIPAL LOCATION:		APPLICATION DATE:
D/B/A NAME:		BRANCH NAME (if applicable):		E-MAIL ADDRESS:
BUSINESS PHONE:	HOME PHONE:	CELL PHONE:	FAX NUMBER:	

#### Location of Branch/Annex Offices

1. _____ <input type="checkbox"/> Branch <input type="checkbox"/> Annex	3. _____ <input type="checkbox"/> Branch <input type="checkbox"/> Annex
2. _____ <input type="checkbox"/> Branch <input type="checkbox"/> Annex	4. _____ <input type="checkbox"/> Branch <input type="checkbox"/> Annex
MAKE OF VEHICLES (NEW DEALERSHIP ONLY): _____ _____	TYPE OF VEHICLES (CHECK ALL THAT APPLY): <input type="checkbox"/> Passenger Cars and Trucks <input type="checkbox"/> Motorcycles/Mopeds  <input type="checkbox"/> Tractor-Trailers
BUILDING SPACE:	YARD SPACE:

#### Names and Addresses of All Officers and Board Members

NAME	COMPLETE RESIDENTIAL ADDRESS	TITLE

I ACKNOWLEDGE READING THE RULES, REGULATION AND R.I.G.L. REGARDING DEALERS, MANUFACTURERS AND RENTAL LICENSES AND HEREBY AGREE TO ABIDE BY THEM.

I, THE UNDERSIGNED, HEREBY DECLARE THAT I AM \_\_\_\_\_ OF THE ABOVE FIRM AND THE  
TITLE, IF ANY  
 ABOVE INFORMATION IS TRUE TO THE BEST OF MY KNOWLEDGE OR BELIEF.

SIGNATURE OF APPLICANT \_\_\_\_\_

STATE OF RHODE ISLAND, COUNTY OF: \_\_\_\_\_

SUBSCRIBED AND SWORN TO BEFORE ME THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, 20 \_\_\_\_\_.

COMMISSION EXPIRES: \_\_\_\_\_ NOTARY SIGNATURE: \_\_\_\_\_

**Note:** Please be advised, pursuant to the Rhode Island Sales and Use Tax Laws, Title 44, Chapter 19, all records, files and information herein will be made available to the Department of Administration, Division of Taxation.



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS  
**DIVISION OF MOTOR VEHICLES - DEALERS' LICENSE AND REGULATION OFFICE**  
600 New London Avenue, Cranston, RI 02920-3024  
Phone: 401-462-5733 Fax: 401-462-5789  
www.dmv.ri.gov

## APPLICATION FOR DEALERS' EMPLOYEE AUTHORIZATION

USE BLUE OR BLACK INK ONLY

### Dealer Information

DEALERSHIP NAME:		AUTHORIZATION NUMBER:		APPLICATION DATE:	
BUSINESS ADDRESS:		CITY/TOWN:		STATE:	ZIP CODE:

The following people, including owner, partner and corporate officer, are properly authorized to pick up 20-day Temporary Plates, Loaner Agreement forms and other forms as allowed by the Department of Motor Vehicles for the above named dealership.

**NAME**

**DRIVER'S LICENSE NUMBER**

It is understood that every dealership is entitled to list a maximum of three (3) employees who are noted on the Dealer Employee Report, receiving a W-2 form. You must contact the Dealers' License and Regulation Office if you must make any changes to this list.

SIGNATURE OF OWNER, PARTNER, MEMBER OR CORPORATE OFFICER \_\_\_\_\_

PRINT NAME \_\_\_\_\_

STATE OF RHODE ISLAND, COUNTY OF: \_\_\_\_\_

SUBSCRIBED AND SWORN TO BEFORE ME THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, 20 \_\_\_\_\_.

COMMISSION EXPIRES: \_\_\_\_\_ NOTARY SIGNATURE: \_\_\_\_\_

**Note:** This is NOT an authorization to register vehicles in the Dealers' Room.





STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS  
**DIVISION OF MOTOR VEHICLES - DEALERS' LICENSE AND REGULATION OFFICE**  
 600 New London Avenue, Cranston, RI 02920-3024  
 Phone: 401-462-5733 Fax: 401-462-5789  
 www.dmv.ri.gov

## BUILDING SPECIFICATIONS

USE BLUE OR BLACK INK ONLY

### Detailed Specifications

CORPORATE NAME:		D/B/A NAME:		APPLICATION DATE:	
PRINCIPAL BUSINESS ADDRESS:			CITY/TOWN:		STATE:
					ZIP CODE:

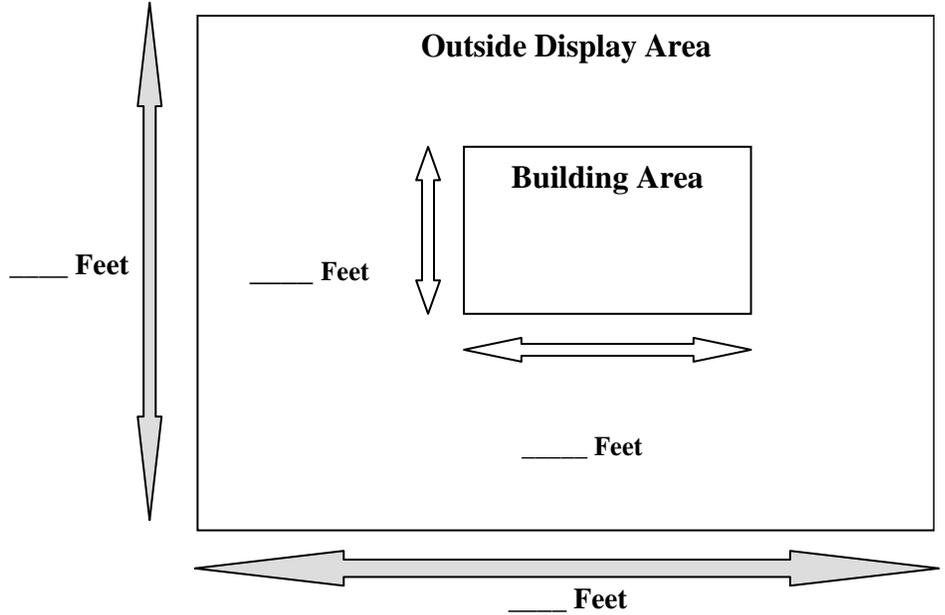
Give the precise area in measurements to be used for sale of vehicles.

#### Outside Display Area

- \* Must be 2,400 square feet to be used for sale of vehicles.
- \* Please show entrance and exits of display area.

#### Building Area

- \* Measurements of the building to be used for automobile sales only.
- \* Must be 2,400 square feet / 4,800 square feet if you have a body shop.
- \* Please show garage doors and entrance to building.



I, THE UNDERSIGNED, HEREBY DECLARE THAT I AM \_\_\_\_\_ OF THE ABOVE FIRM AND THE  
TITLE, IF ANY  
 ABOVE INFORMATION IS TRUE TO THE BEST OF MY KNOWLEDGE OR BELIEF.

SIGNATURE OF APPLICANT \_\_\_\_\_

STATE OF RHODE ISLAND, COUNTY OF: \_\_\_\_\_

SUBSCRIBED AND SWORN TO BEFORE ME THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, 20 \_\_\_\_\_.

COMMISSION EXPIRES: \_\_\_\_\_ NOTARY SIGNATURE: \_\_\_\_\_



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS  
**DIVISION OF MOTOR VEHICLES - DEALERS' LICENSE AND REGULATION OFFICE**  
 600 New London Avenue, Cranston, RI 02920-3024  
 Phone: 401-462-5733 Fax: 401-462-5789  
 www.dmv.ri.gov

## BUREAU OF CRIMINAL IDENTIFICATION RELEASE

USE BLUE OR BLACK INK ONLY

### Applicant Information

APPLICANT NAME:	PRIOR NAME:	SOCIAL SECURITY NUMBER::	APPLICATION DATE:
RESIDENCE ADDRESS:	CITY/TOWN:	STATE:	ZIP CODE:
DATE OF BIRTH:	DRIVER'S LICENSE NUMBER:		
DEALERSHIP NAME:	E-MAIL ADDRESS:		
BUSINESS ADDRESS:	CITY/TOWN:	STATE:	ZIP CODE:

HAVE YOU EVERY HAD CRIMINAL CHARGES OR CIVIL ACTION LODGED AGAINST YOU IN COURT?  YES  NO

IF YES, PLEASE EXPLAIN IN WRITING:

---

---

---

---

---

---

---

---

---

---

### DISCLAIMER

I hereby direct and authorize the Bureau of Criminal Identification of the Department of Attorney General for the State of Rhode Island to make available to the Rhode Island Motor Vehicle Dealers' License and Regulation Office any criminal record that the Bureau of Criminal Identification has on file in reference to me.

I hereby waive and release any and all manner of actions, cause of actions, and demands of any kind, nature and description, arising from any release of criminal records and requests therefrom, whatsoever, against the State of Rhode Island, Bureau of Criminal Identification, the Attorney General's Office, in both law and equity which may now have or in the future may have.

SIGNATURE OF APPLICANT \_\_\_\_\_

STATE OF RHODE ISLAND, COUNTY OF: \_\_\_\_\_

SUBSCRIBED AND SWORN TO BEFORE ME THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, 20 \_\_\_\_\_.

COMMISSION EXPIRES: \_\_\_\_\_ NOTARY SIGNATURE: \_\_\_\_\_

**Note: Copy of photo identification with date of birth must accompany this disclaimer.**



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS  
**DIVISION OF MOTOR VEHICLES - DEALERS' LICENSE AND REGULATION OFFICE**  
600 New London Avenue, Cranston, RI 02920-3024  
Phone: 401-462-5733 Fax: 401-462-5789  
www.dmv.ri.gov

## DEALER ACKNOWLEDGEMENT

USE BLUE OR BLACK INK ONLY

I, the undersigned, acknowledge the receipt of a copy of the Rules and Regulations Regarding Dealers, Manufacturers and Rental Licenses and understand said rules and regulations.	
CORPORATE NAME:	D/B/A NAME:
PRINT NAME:	SIGNATURE:
TITLE:	DATE:
PRINT NAME:	SIGNATURE:
TITLE:	DATE:
PRINT NAME:	SIGNATURE:
TITLE:	DATE:



# FINANCIAL STATEMENT AND BALANCE SHEET

CORPORATE NAME	BUSINESS ADDRESS	CITY	STATE	ZIP CODE
d/b/a NAME		PRESIDENT		
OWNER		VICE PRESIDENT		
PARTNER		SECRETARY		
TREASURER				

### ASSETS

#### Current Assets

- |                                  | <u>Amount</u> |
|----------------------------------|---------------|
| 1. Cash on Hand                  | \$ _____      |
| 2. Cash in _____<br>Name of Bank | \$ _____      |
| 3. Cash in _____<br>Name of Bank | \$ _____      |

#### Receivables

- |                      |          |
|----------------------|----------|
| 4. Accounts \$ _____ | \$ _____ |
|----------------------|----------|

#### Inventories (At Cost Plus Freight)

- |  |          |
|--|----------|
| 5. New and Used Cars & Trucks<br><i>(At cost or book value – whichever is lower)</i> | \$ _____ |
| 6. Parts and Accessories   | \$ _____ |
| 7. Other Inventory (Describe)  | \$ _____ |
| 8. _____   | \$ _____ |
| 9. _____   | \$ _____ |
| 10. _____  | \$ _____ |

#### Prepaid Expenses

- |                            |          |
|----------------------------|----------|
| 11. Rent and Insurance     | \$ _____ |
| 12. Other Prepaid Expenses | \$ _____ |

#### Fixed Assets

- |  |          |
|--|----------|
| 13. Land and Buildings (Auto Business) | \$ _____ |
| 14. Auto Machinery (tools & equipment) | \$ _____ |
| 15. Office Furniture and Fixtures      | \$ _____ |

#### Other Assets Not Listed Above

- |                         |          |
|-------------------------|----------|
| 16. _____               | \$ _____ |
| 17. _____               | \$ _____ |
| 18. _____               | \$ _____ |
| 19. _____               | \$ _____ |
| 20. <b>TOTAL ASSETS</b> | \$ _____ |

### LIABILITIES

#### Current Liabilities

- |  | <u>Amount</u> |
|--|---------------|
| 21. Accounts Payable                   | \$ _____      |
| 22. Notes Payable                      | \$ _____      |
| 23. # of New Cars Floor-Planned        | \$ _____      |
| 24. # of New Trcks. & Impl. Floor-Pln. | \$ _____      |
| 25. # of Demonstrators Floor-Planned   | \$ _____      |
| 26. # Used Vehicles Floor-Planned      | \$ _____      |

#### 27. Customer Deposits on Motor Vehicles to be Delivered *(Names to be Furnished Upon Request)*

- |                                      |          |
|--------------------------------------|----------|
| a. Cash                              | \$ _____ |
| b. Trade-in on other merchandise     | \$ _____ |
| 28. Soc.Sec. & Unemploy. Comp.       | \$ _____ |
| 29. <b>TOTAL (lines 21-28 incl.)</b> | \$ _____ |

#### Mortgages Payable On:

- |  |          |
|--|----------|
| 30. Land and Buildings (Auto Business) | \$ _____ |
| 31. Auto Machinery (tools & equipment) | \$ _____ |
| 32. Office Furniture and Fixtures      | \$ _____ |
| 33. Other _____                        | \$ _____ |
| 34. Judgment Outstanding               | \$ _____ |

#### Reserves and Contingent Liabilities

- |  |          |
|--|----------|
| 35. Land and Buildings (Auto Business) | \$ _____ |
| 36. Other _____                        | \$ _____ |
| 37. _____                              | \$ _____ |
| 38. <b>TOTAL (lines 21-35 incl.)</b>   | \$ _____ |

#### Capital

- |  |          |
|--|----------|
| 39. Stock Outstanding  | \$ _____ |
| 40. Proprietor's Investment  | \$ _____ |
| 41. Partner's Investments  | \$ _____ |
| 42. <b>TOTAL (lines 39-42 incl.)</b><br><i>(should equal total assets)</i> | \$ _____ |

STATE OF \_\_\_\_\_ ) SS.  
 COUNTY \_\_\_\_\_ )

I, \_\_\_\_\_, being first duly sworn on oath, depose and say that the foregoing statement in behalf of the above named applicant and the report of the consumer's deposits are true to the best of my knowledge, except those matters therein stated on information and belief, and I believe them to be true.

Subscribed and sworn to before me on this \_\_\_\_\_ day  
 of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
 Signature of Partner, Owner or Active Officer

\_\_\_\_\_  
 Notary Public

\_\_\_\_\_  
 CPA Signature

\_\_\_\_\_  
 LICENSE NUMBER

Forward original bonds to:  
**RHODE ISLAND DEALERS' LICENSE AND REGULATIONS OFFICE**  
600 New London Avenue, Cranston, RI 02920-3024

That we \_\_\_\_\_  
of \_\_\_\_\_  
as principal and \_\_\_\_\_  
a corporation organized under the laws of the State of \_\_\_\_\_  
and authorized to do business in the State of Rhode Island and having an office at \_\_\_\_\_  
in the State of Rhode Island as surety are held and firmly bound unto the Rhode Island Dealers' License and Regulations Office in the State of  
Rhode Island in the penal sum of \_\_\_\_\_ dollars (\$ \_\_\_\_\_) lawful money of the United  
States of America, well and truly to be paid to the said Regulations Office or their successors, or assigns, for which payment, well and truly to be  
made, we bind ourselves, ours heirs, executors, administrators and successors jointly and severally, firmly by these presents. Said Regulations  
Office may assign to purchasers/sellers of motor vehicles from the principal any and all right arising out of this obligation. WHEREAS, The  
principal has applied or about to apply to the Rhode Island Dealers' License and Regulations Office for a license to conduct the business of a  
motor vehicle dealer pursuant to the provisions of Chapter 1499 Public Laws 1956, as amended, for the year commencing  
\_\_\_\_\_, 20\_\_\_\_\_ and ending December 31, 20\_\_\_\_\_ at \_\_\_\_\_ in the State of Rhode Island.

NOW, THEREFORE, THE CONDITION OF THIS OBLIGATION IS SUCH, that if the said principal shall faithfully comply with the provisions of  
the motor vehicles dealers license law, being Chapter 1499 Public Laws of 1956 as amended or as hereafter amended, and shall promptly pay  
all costs and damages incurred or caused by any violation of the provisions of said Chapter or any regulation of the Rhode Island Dealers'  
License and Regulations Office, then this obligation is to be void, otherwise to remain in full force and effect, subject, however, to the following  
conditions:

1. The aggregate liability of the Surety on account of any and all defaults hereunder shall in no event exceed the penal sum of this bond.
2. Unless previously canceled, as hereinafter provided, this bond shall be in effect for the period of said license. Ending December 31<sup>st</sup> of  
the above-stated calendar year. The Surety may, however, at any time terminate its obligation hereunder by giving sixty (60) days  
written notice to said Principal and the Rhode Island Dealers' License and Regulations Office, in which event the liability of the Surety  
shall, at the expiration of said sixty (60) days, cease and determine, except as to such liability of the Principal for violation of said  
Chapter or regulation of said Regulations Office occurring prior to the expiration of said sixty (60) days.
3. No action to recover hereunder may be brought after the expiration of two (2) years from the termination of this bond.

Signed, sealed and delivered  
in the presence of:

\_\_\_\_\_  
**Print Name of Insurance Agency**

Dealership Name: \_\_\_\_\_

Owner's Signature: \_\_\_\_\_

\_\_\_\_\_  
Surety

by \_\_\_\_\_  
**Surety Authorized Signature**

Title: \_\_\_\_\_

**ACKNOWLEDGEMENT OF PRINCIPAL**

(As owner, partner or corporate officer)

STATE OF RHODE ISLAND

County of \_\_\_\_\_

On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_ before me personally appeared the above-named

\_\_\_\_\_, representing \_\_\_\_\_

as to me known and known to me to be the same person described in and who executed the above instrument and duly acknowledged the  
execution of the same.

\_\_\_\_\_  
**Notary Public**

Approved \_\_\_\_\_, 20\_\_\_\_\_ Rhode Island Dealers' License and Regulations Office

\_\_\_\_\_  
**Administrator**

**IMPORTANT NOTE: THIS BOND IS NOT VALID UNLESS PROOF OF ACCEPTANCE (Power of Attorney Authorization) FROM  
INSURANCE COMPANY IS ATTACHED TO THIS DOCUMENT. SUBMIT ORIGINAL BONDS TO THE DEALERS'  
LICENSE AND REGULATION OFFICE, 600 NEW LONDON AVENUE, CRANSTON, RI 02920**



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

**DIVISION OF MOTOR VEHICLES**  
**DEALERS' LICENSE AND REGULATION OFFICE**  
600 New London Avenue  
Cranston, RI 02920-3024  
Phone: 401-462-5733 Fax: 401-462-5789  
[www.dmv.ri.gov](http://www.dmv.ri.gov)

**NOTICE:**

**Please be advised pursuant to the Rhode Island Sales and Use Tax Laws, Title 44, Chapter 19, all records files and information herein will be made available to the Department of Revenue, Division of Taxation.**

*Carole Dwyer*

---

Administrator, Division of Motor Vehicles



STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS

**DIVISION OF MOTOR VEHICLES**  
**DEALERS' LICENSE AND REGULATION OFFICE**  
600 New London Avenue  
Cranston, RI 02920-3024  
Phone: 401-462-5733 Fax: 401-462-5789  
[www.dmv.ri.gov](http://www.dmv.ri.gov)

**TO: ALL DEALERS**

**SUBJECT: CITY/TOWN LICENSE**

**If your dealership is located in a city or town that requires you to have a second hand license to sell used vehicles, a valid copy of the license must accompany this application. If the license expires during the year, an up-to-date copy must be sent to the Dealers' License and Regulations Office.**

**CITIES THAT CURRENTLY REQUIRE LICENSE:**

**Central Falls**

**Cranston**

**East Providence**

**Esmond**

**Exeter**

**Foster**

**Johnston**

**Pawtucket**

**Providence**

**Warwick**

**West Greenwich**

**Woonsocket**