



Business Licensing



Packet

Vehicle Dealer License Application Instructions

Thank you for your interest in obtaining a Maryland Vehicle Dealers License. It is our intent to help you obtain your license as quickly as possible. If assistance is needed, please e-mail the Motor Vehicle Administration Business Licensing Division at mvablcscsd@mva.maryland.gov. To obtain a Maryland dealer packet, you may visit the Business License Information website at www.mva.maryland.gov. For more information on state and local licensing requirements, visit www.dsd.state.md.us for Code of Maryland Regulations (COMAR) and Maryland Vehicle Law is available online at www.lawlib.state.md.us. Note: Failure to complete the application and submit the required documents will result in your application being rejected.

Getting Started:

You will need to obtain the following:

- **Application for Vehicle Dealers License (CS-042).** Make sure the application is completed in its entirety.
- **Zoning Approval Form (CS-053).** This form must be presented to the Zoning Board in the County/City where your business is located. A representative of the Zoning Board must complete the lower portion of the form.
- **Department of Assessment and Taxation** form/letter that verifies you are registered to do business in the State of Maryland using the name(s) indicated on your application. Both your corporate and trade names must be registered. The Department of Assessment and Taxation is located at 301 W. Preston Street, Baltimore, Maryland 21201. You may contact them by telephone at 410-767-1330, 1331, or 1332 or visit their website at <http://www.dat.state.md.us/sdatweb/sdatforms.html>
- **Completed Dealer Site Inspection.** Prior to becoming licensed, an investigator will go to your place of business and inspect your location to ensure compliance with the Maryland Code of Regulations (COMAR). To schedule your site inspection, please contact MVA Investigation Division at 410-768-7216. Upon approval of your site inspection, the investigator will initial your application and will check that you either passed or failed the inspection.
- **Repair Facility Contract (CS-125).** – If you do not have repair facilities at the location where you will be licensed, you must provide a contract with a repair facility within 5 miles of your dealership. The contract must include Maryland State Police (MSP) inspection if applicable.
- **Dealer Orientation Request** – Before a license can be issued, you must attend a dealer orientation. Please complete the request and submit to the Business Licensing and Consumer Services Division. The orientation is held monthly from 9:00 a.m. – 12:00 noon. All applicants will be scheduled for the next available class.
 - Note: Don't delay in submitting this request! You may not be issued a license until you attend the orientation.

Next Step:

Once the above documents are completed, submit your application and appropriate fees along with the following:

- **ERT Contract** – All new licensees are required to contract with an Electronic Registration and Titling (ERT) provider. A copy of your ERT contract is required to be submitted along with your completed application. For vendor contact information please visit <http://www.mva.maryland.gov/Business-Services/ert.html>
- **Criminal Background Check** – All applicants/licensees must submit a Criminal Background Check. If you live or have lived in another state within the last year, you must provide a criminal record from that state in addition to the Maryland record check.
- **Surety Bond of Vehicle or Trailer Dealer (CS-067A).** The bond required is based on the number of vehicles you sold/projected to be sold. The bond must be in the full name of the dealership including any trade name. It must reflect the full name of all officers, partners, or owners exactly as shown on the application.
- **Workers' Compensation** – If you have Workers' Compensation Insurance, complete information requested on the Application for Vehicle Dealers License in the appropriate section. If you are claiming exemption from providing Worker's Compensation Insurance for your employees, please contact the Workers' Compensation Office at 410-864-5100 or visit their website at www.wcc.state.md.us to obtain information and the appropriate forms for businesses who do not provide this type of coverage.
- **Trader's License (copy)** – A copy of the trader's license obtained from the Circuit Court in the jurisdiction where your business is located is required.
- **Use and Occupancy Permit** – Is required by applicants using a trailer as an office.
- **Franchise Approval from Manufacturer** – New Vehicle Dealers must provide verification of franchise agreements from each manufacturer. A manufacturer must also be licensed with the MVA in order to have its products sold by a dealer in the State of Maryland.
- **New Vehicle Certification Form (CS-22).** – This form defines certain relationships with manufacturers that cannot be licensed as dealers in Maryland.

Mail your completed application packet to:

MVA, BL&CS, Room 146
6601 Ritchie Highway
Glen Burnie, MD 21062



Application for Vehicle Dealer's License

Type of Dealership <input type="checkbox"/> Used Car <input type="checkbox"/> New Car <input type="checkbox"/> Motorcycle <input type="checkbox"/> Trailer over 15 feet <input type="checkbox"/> Boat Trailer/Trailer < 15 ft <input type="checkbox"/> Emergency Vehicle <input type="checkbox"/> Wholesale	Type of Application <input type="checkbox"/> Renewal Application <input type="checkbox"/> Original Application <input type="checkbox"/> Additional Location <input type="checkbox"/> Change of Address <input type="checkbox"/> Change of Ownership	Type of Ownership <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Close Corporation <input type="checkbox"/> LLC <input type="checkbox"/> Individual Owner	_____ Dealer's Lic. # _____ Expiration Date _____ License Control Number
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Company Name (include trade name) _____

Street Address _____

City _____ County _____ State _____ Zip Code _____

Business Phone _____ Business Hours _____

Employer ID Number (FEIN) _____ Current Trader's License Number _____

Email Address _____

Primary Contact (The information will be used for all MVA Business Licensing related matters)

Name _____ Phone Number _____ Email Address _____

**List all owners, partners or officers of the corporation below. Indicate which receives the Gratis Salesman License.
Note: One Gratis Salesman's License is issued per dealer license fee paid.**

Name of Owner, Partner or Officer _____ Social Security Number _____ Position _____ Home Phone No. _____

Street Address (Home) _____ City _____ State _____ Zip Code _____

Date of Birth _____ Driver's License Number _____ State _____

Name of Owner, Partner or Officer _____ Social Security Number _____ Position _____ Home Phone No. _____

Street Address (Home) _____ City _____ State _____ Zip Code _____

Date of Birth _____ Driver's License Number _____ State _____

Name of Owner, Partner or Officer _____ Social Security Number _____ Position _____ Home Phone No. _____

Street Address (Home) _____ City _____ State _____ Zip Code _____

Date of Birth _____ Driver's License Number _____ State _____

Other than those listed above, list all that have direct or indirect financial interest in this dealership. Please attach additional statements if more space is required.

First, Middle, and Last Name _____ Soc. Sec. No. _____

Street Address (Home) _____ City _____ State _____ Zip Code _____

First, Middle, and Last Name _____ Soc. Sec. No. _____

Street Address (Home) _____ City _____ State _____ Zip Code _____

List all places for storage

List makes of vehicles for which your dealership holds a franchise.

YES NO

- 1. Do you operate a repair facility at this location? If no, please attach a completed Service Shop Contract (Form CS-125).
- 2. Have you ever been licensed as a vehicle dealer, salesman, a title service agent in Maryland or any other state?
 If yes, Person Licensed _____
 Name of Business _____ Type of license _____
 License number _____ State _____ Expiration _____
 Submit additional information on separate sheet.
- 3. Are any administrative actions, including suspension, revocation, refusal or fines pending against any license you have ever held?
 NOTE: This does not include your personal driver's license.
 If yes, Business _____ Licensee _____
 Type of license _____ License number _____
 State _____ Expiration _____ Date of action _____
 Submit additional information on a separate sheet.
- 4. Has any business license you have held in Maryland or any other state been suspended, revoked, or refused?
 NOTE: This does not include your personal driver's license.
 If yes, Business _____ Licensee _____
 Type of license _____ License number _____
 State _____ Expiration _____ Date of action _____
 Submit additional information on separate sheet.
- 5. Have any of the owners, management personnel, or any other person who shall have a financial interest, either direct or indirect in the business, ever been convicted of a crime other than a traffic violation? If yes, give details in a separate statement as to date(s).
- 6. Do any of the persons listed on this application have a financial interest, either direct or indirect, with any other new car, used car, motorcycle, trailer, or wholesale dealer in this state? If yes, please give details in a separate statement.
- 7. Are you currently employed with a Maryland State Government Agency? If yes, what Agency? _____
- 8. Was a dealership at this location previously? If yes, please provide information. _____

Insurance Information

- 9. **Surety Bond Insurance Company** _____ **Policy/Binder #** _____ **Agent** _____
- 10. **Do you provide Worker's Compensation?** If no, attach copy of your exemption certificate.
Insurance Company _____ **Policy/Binder #** _____ **Agent** _____
- 11. Do you provide mechanical repair contracts or extended warranties? If yes, as required by law, I have secured a reimbursement insurance policy as follows.
Insurance Company _____ **Policy/Binder #** _____ **Agent** _____
- 12. Number of tags requesting _____ Number of Salesman Employed _____
Insurance Company _____ **Policy/Binder #** _____ **Agent** _____
- 13. Please list number of vehicles sold during the previous year. Retail _____ Wholesale _____
 If an original application, projected number of vehicles to be sold in the next 12 months. _____
- 14. For renewals, please list number of dealer tags assigned to dealership. _____

Certification

All willful misinformation provided with fraudulent intent may be prosecuted under Maryland Law. I solemnly affirm under penalties of perjury and upon personal knowledge the contents of the foregoing document is true and correct. This dealership meets the location requirements and I/we understand the titling and registration, insurance, inspection, and dealer licensing provisions set forth in Maryland Vehicle Law and pertinent Motor Vehicle Administration regulations.

Name of Dealership _____

_____ by _____
Date Applicant Signature Capacity Printed Name

_____ by _____
Date Applicant Signature Capacity Printed Name

_____ by _____
Date Applicant Signature Capacity Printed Name

(All owners and corporate officers are required to sign.)

For MVA Use Only

Date _____ CV CK C

Site Inspection _____ Pass _____ Fail _____ Investigator Printed Name _____ Date _____

Application _____ Accepted _____ Rejected (see Attached) _____ Representative Printed Name _____ Date _____



Apply to register to vote with your driver's license transaction. For details ask your customer service representative.

BOND REQUIREMENTS AND LICENSE FEES

License Type	Number of Vehicles Sold	Amount
New Vehicle	1-500	\$50,000
	501-1,000	\$75,000
	1,001-2,500	\$100,000
	Over 2,500	\$300,000
Used Vehicle	1-250	\$15,000
	251-500	\$25,000
	501-1,000	\$35,000
	1,001-2,500	\$50,000
	Over 2,500	\$150,000
Wholesale	1-250	\$15,000
	251-500	\$25,000
	501-1,000	\$35,000
	1,001-2,500	\$50,000
	Over 2,500	\$150,000

License Type	Number of Vehicles Sold	Amount
Trailer	Boat	\$5,000
Trailer	Under 15 feet	\$5,000
	Over 15 feet:	\$15,000
New Motorcycle	1-500	\$50,000
	501-1,000	\$75,000
	1,001-2,500	\$100,000
	Over 2,500	\$300,000
Used Motorcycle	1-250	\$15,000
	251-500	\$25,000
	501-1,000	\$35,000
	1,001-2,500	\$50,000
	Over 2,500	\$150,000

License Type	Number of Vehicles Sold	Amount
New Emergency	1-500	\$50,000
	501-1,000	\$75,000
	1,001-2,500	\$100,000
	Over 2,500	\$300,000
Used Emergency	1-250	\$15,000
	251-500	\$25,000
	501-1,000	\$35,000
	1,001-2,500	\$50,000
	Over 2,500	\$150,000
Title Service	N/A	\$25,000
Manufacturer, Second Stage Manufacturer, Distributor, or Factory Branch License	1-50	\$25,000
	51-500	\$50,000
	501-10,000	\$100,000
	Over 10,000	\$300,000

LICENSE ISSUANCE AND INTERCHANGEABLE TAG REGISTRATION FEES

Type of Business	Two (2) Year Licensing Fee (New and Renewal)	Two (2) Year Interchangeable Tags (New and Renewal)
New Vehicle Dealer	\$450.00	\$100.00
Used Vehicle Dealer	\$450.00	\$100.00
Wholesale Vehicle Dealer	\$450.00	\$100.00
Motorcycle Dealer	\$270.00	\$50.00
Emergency Vehicle Dealer	\$450.00	\$100.00
Trailer Dealer - Boat Trailers - Trailers less than 15 feet in length - Trailers 15 feet or longer	\$90.00	\$65.00
	\$90.00	\$65.00
	\$270.00	\$65.00
Title Service Agent	\$112.50	N/A
Automotive Dismantler and Recycler	\$360.00	\$125.00
Scrap Processor	\$360.00	\$125.00

Type of Business	Two (2) Year Licensing Fee (New and Renewal)	Two (2) Year Interchangeable Tags (New and Renewal)
Special Mobile Equipment (SME) Owner	N/A	\$125.00
Transporter	N/A	\$125.00
Factory Branch (of Manufacturer)	\$1,800.00	\$100.00
Finance Company	N/A	\$125.00
Manufacturer, Second Stage Manufacturer, Or Distributor 1 to 50 vehicles transferred per year 51-500 vehicles transferred per year 501 to 10,000 vehicles transferred / year Over 10,000 vehicles transferred per year	\$180.00	\$100.00
	\$540.00	\$100.00
	\$900.00	\$100.00
	\$1,800.00	\$100.00

SALESMAN'S LICENSE FEES

Transaction	Fee	Comments
New Salesman's License	\$67.50	
Renewal Salesman's License	\$67.50	
Transfer Salesman's License	\$67.50	
Corrected Salesman's License	\$20.00	Corrected license is gratis if the error was caused by the MVA
Duplicate Salesman's License	\$20.00	



Motor Vehicle Administration
 6601 Ritchie Highway, N.E.
 Glen Burnie, Maryland 21062

BUSINESS LICENSING ORIENTATION REQUEST

Note: Applicants for a dealer or title service license must attend a Business Licensing Orientation Class.
 The class is scheduled monthly at 9:00 a.m. at the Glen Burnie MVA.

Complete this form and return by fax to: **410-768-7602**.
 Or email completed form to: mvablcsd@mva.maryland.gov

Or mail your request to: **Motor Vehicle Administration**
6601 Ritchie Highway, N. E.
Room 146
Glen Burnie, MD 21062

The orientation will give information that is essential in the daily operation of your dealership and will allow time for any questions you may have. Representatives from Business Licensing and Consumer Services and Investigative Services will give presentations.

Questions are welcomed and encouraged.

Please provide the following information:

Participant Name: _____

Participant Address: _____

Participant Phone Number: _____

Participant Email Address: _____

Type of License: _____

Name of Attendees/Job Title: _____

Name of attendees/job title: _____

The Administration strongly encourages participation by owners, title clerks and any staff who may be involved in the day to day operation of your business.

A business license may not be issued until you attend the orientation.

Licensee Signature: _____ Date: _____

You will be scheduled for the next available class. A confirmation notice will be sent to you at the e-mail address indicated above. If you have any questions please e-mail the Motor Vehicle Administration Business Licensing Division at mvablcsd@mdot.state.md.us. Please call if you are unable to attend. Anyone 15 minutes late or more for orientation will be required to reschedule.