



# Application for Auto Recycler Renewal Business Information



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

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

Business Information			
1. License #	2. License Expiration Date	3. Legal Name of Business Entity or Owner	
4. New Mexico Tax ID# (CRS)	5. Federal Tax ID #	6. Mailing Address (may differ from business address)	
7. City		8. County	9. State
		10. Zip Code	
11. Ownership Type <input type="checkbox"/> Proprietorship <input type="checkbox"/> Corporation <input type="checkbox"/> LLC <input type="checkbox"/> Partnership <input type="checkbox"/> Sub-S Corp <input type="checkbox"/> Trust or Estate		12. EPA Permit#	
		13. NMSOS SCC# or Partnership#	
Primary Lot Information			
14. Doing Business As (DBA) Name		15. Business Telephone #	16. Business Fax #
17. Physical Business Street Address			
18. City		19. County	20. State
		21. Zip Code	
22. Preferred Contact Person		23. Telephone #	24. Business E-Mail Address
25. Number of Vehicles Dismantled and/or Crushed Last Year			
Supplemental Location Information			
<i>Please attach a separate sheet with all requested information for each additional location.</i>			
26. Doing Business As (DBA) Name		27. Business Telephone #	28. Business Fax #
29. Physical Business Street Address			
30. City		31. County	32. State
		33. Zip Code	
34. Preferred Contact Person		35. Telephone #	36. Business E-Mail Address
37. Number of Vehicles Dismantled and/or Crushed Last Year			
Bond Verification			
Bond Underwriting Company Information			
38. Name of Bond Underwriter		39. Business Telephone #	
40. Mailing Address		41. City	42. State
		43. Zip Code	
Bond Agency Information			
44. Name of Bond Insurance Agency		45. Business Telephone #	
46. Mailing Address		47. City	48. State
		49. Zip Code	
Bond Information			
50. Bond #	51. Amount	52. Renewal Start Date	53. Renewal End Date

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**Business Information**

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- A. **Any and all changes** concerning the auto recycler 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 **MUST** 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 continuous with license period, e.g. April 1 to March 31.
- C. Proper timeline for submitting Dismantler forms and final destruction of vehicle. Vehicle may be crushed thirty (30) days after the dismantler form has been submitted to the Dealer Bureau. You may dismantle (sell parts) immediately after submitting the form to the DLB as per NMSA 66-3-125. You are required to submit dismantler notices on-line, dismantler books will not be sent out after January 2017.

D. **APPLICANT QUESTIONS**

YES      NO

- Has the applicant, any partner, corporate officer or operating partner ever been denied, had revoked or suspended a dealer, manufacturer, wholesaler, distributor, 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 or plead no contest to any felony or misdemeanor/crime, within the past ten (10) years, excluding minor traffic violations?
- Has the applicant or any partner of said applicant ever had a motor vehicle dealer/auto recycler/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?

- E. 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.**

F. _____	G. _____	H. _____
Applicant Full Name Printed/Typed	Applicant Signature	Date

State of New Mexico	
I. County of _____	
J. Acknowledgement: On the _____ day of _____ (month) of _____, the above named person, either personally known to me or identified through satisfactory evidence, appeared to me and indicated that he/she signed the foregoing document voluntarily for the purposes herein.	
K. _____	M. _____
Signature of Notarial Official	
L. My Commission Expires _____	Place Notary Seal or Stamp Here

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**Business Information**

1. License Number	3. Legal Name of Business Entity or Owner
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**Entity Owner Applicant Verification**

54. Ownership Type <input type="checkbox"/> Corporation, incl. Sub-S <input type="checkbox"/> LLC <input type="checkbox"/> Trust or Estate <input type="checkbox"/> Partnership <input type="checkbox"/> Other (attach explanation)	55. Legal Name of Owner Entity - <b>not DBA, trade name or person's name</b>		
	56. Contact Person Name	57. Telephone Number	58. % Owned by Entity
	59. Entity Address		
60. City	61. County	62. State	63. Zip Code

**Individual Owner Applicant Information**

64. Last Name	65. First Name	66. MI	
67. Business Title	68. % Owned	69. Physical Home Address	
70. City	71. County	72. State	73. Zip Code
74. Driver License Number	75. State of Issuance	76. Date of Birth	77. Residence Telephone # <b>(not a business #)</b>

**Individual Owner Applicant Information**

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### 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 Auto Recycler 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.**

- Please fill form online, print clearly or type. All boxes must be filled in.
- This document must be signed by the owner or responsible officer/agent (see page 2, letters F through H), and must be properly notarized (see page 2, letters I through M). The signature will be accepted as valid only if the signer's information is currently in the DLB records.
- Please provide a copy of out of state driver license.
- 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:

- Business License(s)/ documents for primary and supplemental locations, i.e. license, registration, permit or letter issued by local governmental agency.
- Bond receipt(s) for renewal year include receipts for separate bonds for any and all supplemental locations. Submit one type of acceptable receipt as specified in instruction #53 on page 6.
- Printout of NOI Application Detail Page [www.epa.gov/npdes/noisearch](http://www.epa.gov/npdes/noisearch) (must be current - no more than seven days old).
- Printout of NMVTIS Compliance Report for agency you report to or NMVTIS at the website below (must be current - no more than seven days old). [www.vehiclehistory.gov/nmvtis](http://www.vehiclehistory.gov/nmvtis). Submit a copy of your last report.
- \$50.00 renewal application fee (check or money order only, payable to MVD).

**Send completed packet to the address at the top.**

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### 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. EPA information must be provided, including permit number and a copy of the NOI Application detail page. For information regarding the NOI Application detail page, see checklist. A license will not be issued if a copy of the NOI is not included.
13. **ALL corporation and partnership types** enter the SCC# or partnership# issued by the New Mexico Secretary of State (SOS).

### Page 1 Primary Lot Information

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

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

### Page 1 Supplemental Lot Information

26-37 follow the same instructions as 14-25 for each location.

- You will need to provide a NOI detail page for each supplemental lot. 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.

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### Page 1 Bond Information

38. The name of the Bond Insurance Company that carries your bond (Western, CNA, Sentry, Fidelity, etc.)
39. Bond Insurance company's business telephone number.
- 40-43. Bond Insurance company's mailing address, city, state and zip code.
44. The name of the Bond Insurance Agency from which you purchased your bond (Ex. Ashton, Garcia, Tooter Cosper etc.)
45. Insurance agent's business telephone number.
- 46-49. Bond Insurance agent's mailing address, city, state and zip code.
50. The number on your auto recycler bond.
51. The amount of your bond.
52. Please enter the date your bond renews for this year, **NOT** the date the bond was first written. All bonds must be continuous with the license period.
53. 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 the 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:
    - o A receipt from the bond company stating: business name, bond number, and current renewal effective beginning and ending dates.
    - o 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.
    - o 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-E Please review this information carefully, particularly the paragraph in bold print above the signature lines.
- F-H Owner or responsible executive officer must print and sign their name and date the form.
- I-M The document must be notarized.

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### 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.
54. Check one box only; corporation, LLC, estate or trust, partnership, other (incl. nonprofit). **NOT** a person's name.
  55. Enter name of corporation, LLC, trust, estate or other legal entity. May be the same as #3 on page 1.
  56. 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.
  57. Enter contact person's telephone number.
  58. Enter the Entity's ownership percentage. **DO NOT** enter the contact person's percentage.
  - 59-63. 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.

64-77 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 64-77 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.
64. Last name of individual.
  65. First name of individual.
  66. Middle initial of individual.
  67. Business title.
  68. 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.
  - 69-73. Enter a residence street, city, county, state and zip code, not a business address.
  74. Enter driver license number
  75. Enter state of issuance for driver license.
  76. Enter the month/day/and year for date of birth.
  77. The residence phone must be different than the business phone number.