

AUTOMOTIVE REPAIR DEALER REGISTRATION APPLICATION INSTRUCTIONS

IMPORTANT: Complete the application in accordance with the instructions below and attach additional pages and supporting documentation as necessary. Submit a completed application and the \$200 fee for each business location to the Bureau of Automotive Repair (BAR) at the address listed above. Make check or money order payable to the Department of Consumer Affairs (DCA).

- **FEES ARE NON-REFUNDABLE PURSUANT TO BUSINESS AND PROFESSIONS CODE SECTION 158.**
- If BAR cannot validate requirements for registration, a deficiency letter requesting the missing information and/or documentation will be sent to you. This will delay the processing of your application.
- A registration will be mailed to the business address (address of record) after your application is processed and approved. The average processing time is four to six weeks from the receipt of your application, provided the application does not have any deficiencies.

REQUIRED INFORMATION: Complete all fields. If not applicable, indicate N/A. Attach additional pages if necessary.

1. **BUSINESS ORGANIZATION:** Select only one: Sole proprietorship (individual), partnership, limited partnership, corporation, or limited liability company.
2. **NAME OF BUSINESS:** Provide the exact name under which the business will be conducted. This same name should be shown on all invoices and advertisements. **NOTE: The motor vehicle license plate number, if provided in item 14 (c), will be included as part of the registered business name.**
3. **NAME OF CORPORATION/LIMITED LIABILITY COMPANY:** Provide the name of the corporation/limited liability company as filed with the California Secretary of State or as listed in the Federal Register pursuant to the Federally Recognized Indian Tribe List Act of 1994 (25 U.S.C. Sec. 5131). (This item does not apply to businesses owned by individuals or partnerships.)
4. **CORPORATION/LIMITED LIABILITY COMPANY NUMBER:** Provide the corporation/limited liability company number assigned by the California Secretary of State or as listed in the Federal Register pursuant to the Federally Recognized Indian Tribe List Act of 1994 (25 U.S.C. Sec. 5131) if applicable. (This item does not apply to businesses owned by individuals or partnerships.)
5. **FEDERAL EMPLOYER IDENTIFICATION NUMBER:** Provide the Federal Employer Identification Number (FEIN) if the business is a partnership.
6. **BUSINESS ADDRESS:** Provide the physical address where business is conducted and/or records will be maintained. PO Boxes are not permitted. If the business is located at an address that has multiple businesses, you must provide the unit/suite number since each business must have a unique address. Registrations and all licenses are mailed to the business address. The business address must be shown on invoices and advertisements. The business address will be disclosed on BAR's website as the address of record.
7. **MAILING ADDRESS:** Complete only if you wish to receive correspondence at an address other than the business address. **NOTE: If you provide a mailing address, renewal notices will be sent only to this address.**
8. **BUSINESS TELEPHONE NUMBER:** Provide the area code and telephone number for the business.
9. **EMAIL ADDRESS:** Provide a valid email address for receipt of correspondence from BAR by email.
10. **CONTROLLING INDIVIDUALS OF THE BUSINESS:** Provide all information, as applicable, for each controlling individual of the business, including all owners, directors, officers, partners, members, trustees, managers, and any persons who directly or indirectly control or conduct the business. **NOTE: If all owners reside outside of California, a Responsible Managing Employee (RME) with residence in California must be identified.**
11. **BACKGROUND:** Select YES or NO for each question. If YES, provide all applicable information and documentation. Any applicable information not provided may result in denial of this application or legal action later to revoke the registration.

12. DOMESTIC/FOREIGN LIMITED LIABILITY COMPANY DOCUMENTS: If the business is owned by a limited liability company, provide the domestic or foreign limited liability company number as assigned by the California Secretary of State and attach a copy of the following applicable documentation.
- Domestic Limited Liability Company: Articles of Organization and Charter, Statement of Information, Operating Agreement, and Trust Agreement (if a member of the limited liability company is a trust).
 - Foreign Limited Liability Company: Application to Register and Charter (issued by the state where the foreign limited liability company was formed), Statement of Information, Certificate Registration, Operating Agreement, and Trust Agreement (if a member of the limited liability company is a trust).
13. PERMITS AND LICENSES: If not applicable, indicate N/A or Exempt.
- Seller Permit Number: Provide the seller permit number as assigned by the California Board of Equalization.
 - City/County Business License Number: Provide the business license number as assigned by the local city or county official of that jurisdiction. If the office or jurisdiction does not require a business license, attach a detailed statement dated and signed by a controlling individual of the business.
 - Hazardous Waste Identification Number: Provide the hazardous waste identification number as assigned by the United States or California Environmental Protection Agency.
14. SERVICES:
- Items (a) and (b): Using the list provided, indicate the number(s) corresponding to the primary and secondary services performed by the business.
 - Item (c): Select YES or NO. If YES, provide the license plate number for the motor vehicle used to perform mobile automotive repairs. The motor vehicle license plate number will be included as part of the registered business name that must be shown on all invoices and advertisements. (California Code of Regulations, title 16, section 33351.7.3)
 - Item (d): Select YES or NO. If YES, and the business is required by law to possess an Air Quality Management District spray booth permit number, provide the spray booth number and attach a copy of the permit. (Business and Professions Code section 9889.52)
15. EDUCATIONAL CERTIFICATION INFORMATION: Select YES or NO. If YES, attach a copy of each certification and provide any of the following applicable information if not reflected on the certificate: the name of the individual who possesses the certification, title of the certification, name of the certification provider, certificate number, date of issuance of the certification, and the expiration date of the certification.
- Nationally recognized and industry-accepted educational certification includes a diploma, certificate of completion, or a degree as defined in Section 94830 of the Education Code obtained after successful completion of any training on automotive repair, the diagnosis and repair of a motor vehicle, automotive technology, automotive service technology, or customer service related to automotive repair and/or testing provided by any of the following: a vehicle manufacturer, the Inter-Industry Conference on Automotive Collision Repair (I-CAR), the National Institute for Automotive Service Excellence (ASE), or by an educational institution accredited by an accrediting agency recognized by the U.S. Department of Education.
 - Bureau-accepted educational certification includes a certification meeting the requirements outlined in California Code of Regulations section 3395.6. Certification subject areas include any of the following: the diagnosis and repair of a motor vehicle, the Automotive Repair Act and related laws and regulations, or customer service related to automotive repair. For more information, visit www.bar.ca.gov.
16. CERTIFICATION: The controlling individual(s) of the business must read, sign, and date the application. Signatures affirm that all statements are true and correct. Any false statements made on this application may result in denial of this application or legal action later to revoke the registration.

ADDITIONAL INFORMATION

CHANGE OF BUSINESS NAME, ADDRESS, OR CONTROLLING INDIVIDUALS

Licenses must notify BAR within 14 days of a change of business name, address, or controlling individuals. (California Code of Regulations, title 16, sections 3351.1(d)) To report a change, complete a Change of Name/Address/Corporate Officers for available at www.bar.ca.gov.

CHANGE OF OWNERSHIP

An ownership change consists of any change in legal ownership of the registered business, including the purchase of an existing business, addition or deletion of a partner, the transfer of any ownership interest between family members, change of the business entity by incorporation of the business, or any other change in the corporate status that requires a new corporate number issued by the California Secretary of State. When a change in the business ownership takes place, you must cease operating as an automotive repair dealer and submit a new application and fee.

RENEWAL OF REGISTRATION

You must renew your registration annually by submitting the renewal notice, or a copy of your registration, and renewal fee to the address provided on the renewal notice or on this application. BAR makes every effort to mail you a courtesy notice approximately 90 days before expiration of your current registration. However, if you do not receive a renewal notice, you are still responsible for renewing your registration. If you renew your registration after the date of expiration, you will be charged a delinquency fee of \$50 in addition to the renewal fee of \$200 for a total of \$250.

TYPE OF REPAIR BUSINESS REQUIRED TO REGISTER

A valid registration is required for any business that, for compensation, performs tests or repairs to, maintenance of, or diagnosis of malfunctions of any of the following automotive or motorcycle components:

- AIR CONDITIONING SYSTEM
- BODY AND FRAME
- BRAKES
- CLUTCH
- DRIVE TRAIN ASSEMBLY
- ELECTRICAL SYSTEM
- ENGINE
- SUSPENSION
- TRANSMISSION
- STEERING GEAR
- EMISSION CONTROL SYSTEM
- FUEL SYSTEM
- HEATER SYSTEM
- GLASS COMPONENTS
- OTHER AUTOMOTIVE/MOTORCYCLE COMPONENTS
(not specifically excluded)

TYPE OF REPAIR BUSINESS NOT REQUIRED TO REGISTER

No registration is required for the following:

- A business that services only vehicles other than passenger vehicles.
- A fleet owner repairing only fleet vehicles.
- Machine shops that meet all of the following criteria:
 1. Primary business is the wholesale supply of new or rebuilt automotive parts; and
 2. Solely engages in the remanufacturing of individual automotive parts without compensation for warranty adjustments; and
 3. Does not engage in repairing or diagnosing malfunctions of motor vehicles or motorcycles.

COLLECTION AND USE OF PERSONAL INFORMATION

BAR collects personal information only as allowed by law. Please see the [Notice on Collection of Personal Information](#) available at www.bar.ca.gov.



**AUTOMOTIVE REPAIR DEALER REGISTRATION
APPLICATION
FEE \$200**

| FOR DEPARTMENT USE ONLY |
|-------------------------|
| ARD #: |
| Issue Date: |
| Business Type: |
| Receipt #: |
| ATS #: |

Please type or print legibly in ink. Complete all fields. If not applicable, indicate N/A.

| | | | | | | |
|--|--|---------------------------|------|-----------------------------------|----------|--|
| 1. BUSINESS ORGANIZATION (SELECT ONLY ONE) | | | | | | |
| Sole Proprietorship (Individual) | | Partnership | | Limited Partnership | | |
| Corporation | | Limited Liability Company | | Federally Recognized Indian Tribe | | |
| 2. NAME OF BUSINESS (DBA/TO BE SHOWN ON INVOICES AND ADVERTISEMENTS) | | | | | | |
| 3. NAME OF CORPORATION/LIMITED LIABILITY COMPANY (AS FILED WITH THE CALIFORNIA SECRETARY OF STATE OR FEDERALLY RECOGNIZED INDIAN TRIBE) | | | | | | |
| 4. CORPORATION/LIMITED LIABILITY COMPANY NUMBER (AS FILED WITH THE CALIFORNIA SECRETARY OF STATE OR FEDERALLY RECOGNIZED INDIAN TRIBE) | | | | | | |
| 5. FEDERAL EMPLOYER IDENTIFICATION NUMBER (PARTNERSHIPS ONLY) | | | | | | |
| 6. BUSINESS ADDRESS (ADDRESS OF RECORD) | | | | | | |
| Number and Street | | Suite or Unit # | City | State | Zip Code | |
| 7. MAILING ADDRESS | | | | | | |
| Number and Street | | Suite or Unit # | City | State | Zip Code | |
| 8. BUSINESS TELEPHONE NUMBER | | | | 9. EMAIL ADDRESS | | |
| 10. CONTROLLING INDIVIDUALS OF THE BUSINESS - Provide all information, as applicable, for each controlling individual of the business, including all owners, directors, officers, partners, members, trustees, managers, and any persons who directly or indirectly control or conduct the business. Enter full legal names, NO INITIALS. If legal name contains initials only, so state. If a PARTNERSHIP, list all partners. If a CORPORATION, list all officers and directors, (i.e., President, Secretary, and Treasurer). If the same person holds all corporate offices, so state. If a LIMITED LIABILITY COMPANY, list all members. If a member of the limited liability company is a Trust, list all Trustees. If all owners reside outside of California, list a Responsible Managing Employee (RME) with residence in California. Attach additional pages if necessary. | | | | | | |
| FULL NAME Last First Middle | | | | TITLE | | |
| SOCIAL SECURITY NUMBER/INDIVIDUAL TAXPAYER IDENTIFICATION NUMBER | | | | TELEPHONE NUMBER | | |
| GOVERNMENT PHOTO ID ISSUING AUTHORITY, DOCUMENT TITLE, AND NUMBER (EXAMPLE: CALIFORNIA DRIVER LICENSE A123456) | | | | EMAIL ADDRESS | | |
| BUSINESS ADDRESS | | | | | | |
| Number and Street | | Suite or Unit # | City | State | Zip Code | |
| FULL NAME Last First Middle | | | | TITLE | | |
| SOCIAL SECURITY NUMBER/INDIVIDUAL TAXPAYER IDENTIFICATION NUMBER | | | | TELEPHONE NUMBER | | |
| GOVERNMENT PHOTO ID ISSUING AUTHORITY, DOCUMENT TITLE, AND NUMBER (EXAMPLE: CALIFORNIA DRIVER LICENSE A123456) | | | | EMAIL ADDRESS | | |
| BUSINESS ADDRESS | | | | | | |
| Number and Street | | Suite or Unit # | City | State | Zip Code | |

| | |
|--|-------------------------|
| FULL NAME Last First Middle | TITLE |
| SOCIAL SECURITY NUMBER/INDIVIDUAL TAXPAYER IDENTIFICATION NUMBER | TELEPHONE NUMBER |
| GOVERNMENT PHOTO ID ISSUING AUTHORITY, DOCUMENT TITLE, AND NUMBER (EXAMPLE: CALIFORNIA DRIVER LICENSE A123456) | EMAIL ADDRESS |
| BUSINESS ADDRESS Number and Street Suite or Unit # | City State Zip Code |

| | | |
|---|------------|-----------|
| 11. BACKGROUND | | |
| a. Is any controlling individual of the business serving, or has previously served, in the United States Armed Forces? | YES | NO |
| b. Is any controlling individual of the business an honorably discharged member of the United States Armed Forces? If YES, the applicant may qualify for expedited licensure. Attach the following documentation, if applicable: a certificate of release or discharge from active duty (DD-214) or other documentary evidence showing date and type of discharge. (Business and Professions Code section 115.4) | YES | NO |
| c. Do both of the following statements apply to any controlling individual of the business? <ul style="list-style-type: none"> The controlling individual is married to, or in a domestic partnership or other legal union with, an active duty member of the United States Armed Forces assigned to a duty station in California under official active duty military orders. The controlling individual holds a current, active, and unrestricted automotive repair dealer license in another state, district, or territory of the United States. If YES, the applicant may qualify for expedited licensure and a waiver of the application fee. Attach the following documentation: (1) a certificate of marriage/domestic partnership, (2) a copy of the military orders establishing the spouse's/partner's duty station in California, and (3) written verification from the licensing agency/entity stating that the applicant holds a current license in good standing. (Business and Professions Code section 115.5) | YES | NO |
| d. Is any controlling individual of the business a refugee, asylee, or holder of a special immigration visa? If YES, the applicant may qualify for expedited licensure. Attach the following documentation, as applicable: Form I-94, arrival/departure record, with an admission class code such as "RE" (Refugee) or "AY" (Asylee) or other information designating the person a refugee or asylee; Special Immigrant Visa that includes "SI" or "SQ"; Permanent Resident Card (Form I-551), commonly known as a "Green Card," with a category designation indicating that the person was admitted as a refugee or asylee; an order from a court of competent jurisdiction or other documentary evidence that provides reasonable assurance that the applicant qualifies for expedited licensure. (Business and Professions Code section 135.4) | YES | NO |
| e. Has any controlling individual of the business, or any business a controlling individual is or was directly or indirectly in control of, ever been convicted of any offense or entered a plea of nolo contendere in this or any other state in the United States or a foreign country? This includes every citation, infraction, misdemeanor and/or felony, including traffic violations. NOTE: Convictions that were adjudicated in the juvenile court or convictions two years or older under California Health and Safety Code sections 11357(b), (c), (d), or section 11360(b) should not be reported. Convictions that were later dismissed by the court or set aside pursuant to Section 1203.4, 1203.4(a), 1203.41, 1203.42, or 1203.425 of the California Penal Code or equivalent non-California law MUST be disclosed. If YES, provide a statement of explanation. For CRIMINAL CONVICTIONS, include: the date and place of arrest, name of court, court case number, code section violated, brief explanation of the offense, and the sentence imposed. For DISCIPLINE, include: the type of license, effective date and type of disciplinary action, name and location of licensing board, and brief explanation of violations found by the licensing board. For CITATIONS, include: the type of license, effective date, name and location of licensing board, and a brief explanation of violations cited by the licensing board. | YES | NO |

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| <p>f. Exclusive of juvenile court adjudications and criminal charges dismissed under Section 1000.3 of the California Penal Code or equivalent non-California laws, or convictions two years or older under California Health and Safety Code sections 11357(b), (c), (d), or section 11360(b), has any controlling individual of the business had a conviction that was later dismissed or set aside by the court?</p> <p>If YES, provide a statement of explanation. Include the date and place of arrest, name of court, court case number, code section violated, brief explanation of the offense, and the sentence imposed.</p> | <p>YES</p> | <p>NO</p> |
| <p>g. Does any controlling individual of the business, or any business a controlling individual is directly or indirectly in control of, have any administrative or criminal action pending against them/it, or is currently awaiting judgment and sentencing following entry of a plea or jury verdict?</p> <p>If YES, provide a statement of explanation.</p> | <p>YES</p> | <p>NO</p> |
| <p>h. Has any controlling individual of the business, or any business a controlling individual is or was directly or indirectly in control of, had a license, registration, or certification that was denied or formally disciplined by a licensing board in or outside of California, including BAR, or any board in the Department of Consumer Affairs (as defined in Section 22 of the Business and Professions Code) within the preceding seven years? Discipline includes a citation, reproof, suspension, revocation, probation or any other form of restriction placed on the license, registration, or certification.</p> <p>If YES, provide a statement of explanation. For DISCIPLINE, include: the type of license, effective date and type of disciplinary action, name and location of licensing board, and brief explanation of violations found by the licensing board. For CITATIONS, include: the type of license, effective date, name and location of licensing board, and a brief explanation of violations cited by the licensing board.</p> | <p>YES</p> | <p>NO</p> |
| <p>i. Does any controlling individual of the business, or any business a controlling individual is directly or indirectly in control of, have a CURRENT registration, license, or certification issued by BAR?</p> <p>If YES, list the name(s) and registration number(s), license number(s), and/or certification(s).</p> | <p>YES</p> | <p>NO</p> |
| <p>j. Has any controlling individual of the business, or any business a controlling individual was directly or indirectly in control of, ever had a PRIOR registration, license, or certification issued by BAR?</p> <p>If YES, list the name(s) and registration number(s), license number(s), and/or certification(s).</p> | <p>YES</p> | <p>NO</p> |

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|--|--|---|--------------------|-----------------------|---------------------------|------------------------------|-----------------------------|--------------------------------|----------------|----------------------|---------------------|----------------------------|------------------|----------------------|-----------------------------|-------------------------|------------------------------|-------------------------------|---------------------|---|---------------------|--------------|-------------------------------|----------------|------------------|------------------|------------|-----------------|--|------------|----------------------------------|--|
| k. Is this a change of ownership? If YES, attach a copy of the proof of sale. | YES | NO | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 12. DOMESTIC/FOREIGN LIMITED LIABILITY COMPANY DOCUMENTS - Under Corporations Code, title 2.6, articles 8 and 13, all limited liability companies (LLC) must be registered as a domestic or foreign LLC in good standing with the California Secretary of State. If the business is owned by an LLC, attach a copy of the applicable supporting documents. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| a. Domestic Limited Liability Company Attach a copy of the following: | <ul style="list-style-type: none"> • Articles of Organization and Charter • Statement of Information | <ul style="list-style-type: none"> • Operating Agreement • Trust Agreement (if a member of the LLC is a trust) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| b. Foreign Limited Liability Company Attach a copy of the following: | <ul style="list-style-type: none"> • Application to Register and Charter (issued by the state where the foreign LLC was formed) • Statement of Information | <ul style="list-style-type: none"> • Certificate of Registration • Operating Agreement • Trust Agreement (if a member of the LLC is a trust) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 13. PERMITS AND LICENSES (If not applicable, indicate N/A or exempt.) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| a. Seller Permit Number _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| b. City/County Business License Number _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| c. Hazardous Waste Identification Number _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 14. SERVICES - Items (a) and (b): Using the list provided, indicate the number(s) corresponding to the primary and secondary services performed by the business. Items (c) and (d): Select YES or NO. If YES, provide all applicable information and attach applicable documentation. | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| a. Primary Business Service Type _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| b. Secondary Business Service Type _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%;">10. General Repair</td> <td style="width: 33%;">20. Diagnostic Center</td> <td style="width: 33%;">30. Air Conditioning Shop</td> </tr> <tr> <td>11. Preventative Maintenance</td> <td>21. Auto Wrecker/Dismantler</td> <td>31. Trailer Hitch Installation</td> </tr> <tr> <td>12. Smog Check</td> <td>22. Glass/Windshield</td> <td>32. Oil/Lube/Filter</td> </tr> <tr> <td>13. Auto Body and/or Paint</td> <td>23. Transmission</td> <td>33. Electric Vehicle</td> </tr> <tr> <td>14. New/Used Car Dealership</td> <td>24. Brake and Alignment</td> <td>34. Alternative Fuel Vehicle</td> </tr> <tr> <td>15. Used Cars Only Dealership</td> <td>25. Muffler/Exhaust</td> <td>35. Ignition Interlock Device Installer</td> </tr> <tr> <td>16. Franchise/Chain</td> <td>26. Radiator</td> <td>36. Automotive Parts Retailer</td> </tr> <tr> <td>17. Motorcycle</td> <td>27. Machine Shop</td> <td>40. Other: _____</td> </tr> <tr> <td>18. Engine</td> <td>28. Tire/Wheels</td> <td></td> </tr> <tr> <td>19. Mobile</td> <td>29. Auto Training School/College</td> <td></td> </tr> </table> | | | 10. General Repair | 20. Diagnostic Center | 30. Air Conditioning Shop | 11. Preventative Maintenance | 21. Auto Wrecker/Dismantler | 31. Trailer Hitch Installation | 12. Smog Check | 22. Glass/Windshield | 32. Oil/Lube/Filter | 13. Auto Body and/or Paint | 23. Transmission | 33. Electric Vehicle | 14. New/Used Car Dealership | 24. Brake and Alignment | 34. Alternative Fuel Vehicle | 15. Used Cars Only Dealership | 25. Muffler/Exhaust | 35. Ignition Interlock Device Installer | 16. Franchise/Chain | 26. Radiator | 36. Automotive Parts Retailer | 17. Motorcycle | 27. Machine Shop | 40. Other: _____ | 18. Engine | 28. Tire/Wheels | | 19. Mobile | 29. Auto Training School/College | |
| 10. General Repair | 20. Diagnostic Center | 30. Air Conditioning Shop | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 11. Preventative Maintenance | 21. Auto Wrecker/Dismantler | 31. Trailer Hitch Installation | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 12. Smog Check | 22. Glass/Windshield | 32. Oil/Lube/Filter | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 13. Auto Body and/or Paint | 23. Transmission | 33. Electric Vehicle | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 14. New/Used Car Dealership | 24. Brake and Alignment | 34. Alternative Fuel Vehicle | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 15. Used Cars Only Dealership | 25. Muffler/Exhaust | 35. Ignition Interlock Device Installer | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 16. Franchise/Chain | 26. Radiator | 36. Automotive Parts Retailer | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 17. Motorcycle | 27. Machine Shop | 40. Other: _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 18. Engine | 28. Tire/Wheels | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 19. Mobile | 29. Auto Training School/College | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| c. Will the business be engaged solely in mobile automotive repairs <u>and</u> not operate a facility where the diagnosis or repair of motor vehicles is performed? If YES, provide the license plate number for the motor vehicle used to perform the mobile automotive repairs. Motor Vehicle License Plate Number _____ PLEASE NOTE: The motor vehicle license plate number will be included as part of the registered business name that must be shown on all invoices and advertisements. | YES | NO | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| d. Will the business perform auto body repair work? If YES, and the business is required by law to possess an Air Quality Management District spray booth permit number, provide the spray booth permit number and attach a copy of the permit. (Business and Professions Code section 9889.52) Spray Booth Permit Number _____ | YES | NO | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

15. EDUCATIONAL CERTIFICATIONS

Does any controlling individual of the business, or any other person(s) employed at the business, possess any applicable nationally recognized and industry-accepted educational certifications and/or any Bureau-accepted educational certifications?

YES

NO

If YES, attach a copy of the certification and provide the following applicable information, if not reflected on the certificate: the name of the individual who possesses the certification, title of the certification, name of the certification provider, certificate number, date of issuance of the certification, and the expiration date of the certification.

16. CERTIFICATION - Each controlling individual of the business must sign and date this application. Attach additional pages if necessary.

PLEASE NOTE: Pursuant to Business and Professions Code section 9884.6(a), you may not perform any activities at this location for which you are required to possess a valid automotive repair dealer (ARD) registration until an ARD registration is issued. In addition, section 9884.4 states that an ARD registration shall cease to be valid when the Director finds that any of the information provided by this form ceases to be current. Furthermore, California Code of Regulations, title 16, section 3351 requires that the application shall be accompanied by the registration fee and any evidence, statements, or documents required on the application. Add additional pages for certification as needed based upon business type and titles.

I certify under penalty of perjury under the laws of the state of California that all the statements made in this application and all attached supporting documents pertaining to this application are true and correct.

SIGNATURE _____ **TITLE** _____ **DATE** _____

SIGNATURE _____ **TITLE** _____ **DATE** _____

SIGNATURE _____ **TITLE** _____ **DATE** _____

NOTE: Once submitted, your application and supporting documentation become the property of BAR and will be kept as a matter of record. MAKE A COPY OF THIS COMPLETED AND SIGNED APPLICATION FOR YOUR RECORDS.