

Online License Application Guide

Each step of the online application process is listed below. For additional details on any of the steps, please click the link and you will be directed to the appropriate page.

Finding the License Application

1. Navigate to dealers.sos.in.gov p. 1
2. Sign in p. 2
3. Select “License Application” p. 3

Completing the License Application

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Welcome to The State of Indiana

Sign In

Email Address

Password [Forgot your password?](#)

[Sign in](#)

Don't have an account? [Sign up now](#)

[Need Help?](#)

Signing In

- If you already have a log-in for INBiz, you can use that same log-in information here
- If you do not already have an account, select "Sign up now" to create one

License Application

MY DASHBOARD 0 LOGOUT

ALERTS AND ANNOUNCEMENTS [View All](#)

| TYPE | SUBJECT | GENERATED DATE |
|---------------------|---------|----------------|
| NO RECORDS TO VIEW. | | |

NOTIFICATIONS [View All](#)

| SUBJECT | GENERATED DATE | ACTION |
|---|----------------|--------|
| ATTORNEY GENERAL MEMO RE SELF-REPORTING PROGRAM | 9/27/2019 | |
| ATTORNEY GENERAL SELF-REPORTING PROGRAM | 9/27/2019 | |
| [REDACTED] - RENEWAL LICENSE - 11/1/2019 | 9/17/2019 | |
| DEALER TRAINING 2019 | 9/4/2019 | |
| DEALER DIGEST- AUGUST 2019 | 8/14/2019 | |

INVOICES [View All](#)

| INVOICE | DATE | DEALER # | DEALER NAME | WORKORDER # | PAYMENT STATUS |
|---------|------|----------|-------------|-------------|----------------|
|---------|------|----------|-------------|-------------|----------------|

RECENT TRANSACTIONS [View All](#)

| DEALER # | DEALER NAME | TRANSACTION TYPE | STATUS | WORK ORDER # | DATE |
|----------|-------------|------------------|--------|--------------|------|
|----------|-------------|------------------|--------|--------------|------|

MY DASHBOARD
ONLINE SERVICES
MY PROFILE
FIND MY DEALER LICENSES
FORMS
CONTACT US
LICENSE APPLICATION

- Select "License Application" from the bottom of the left-side menu.
- If you do not see "License Application," check to see if you need to scroll farther to the bottom or to the left.

Information Page

AUTO DEALER SERVICES DIVISION Welcome!

LICENSE APPLICATION - INFORMATION **LOGOUT**

MY DASHBOARD
ONLINE SERVICES
MY PROFILE
FIND MY DEALER LICENSES
FORMS
CONTACT US
LICENSE APPLICATION

INFORMATION DEALER BUSINESS ENTITY OWNER SOP|INSURANCE|BOND DEALERSHIP INFORMATION DEALER PLATES AFFIRMATION DOCUMENTS

PLEASE READ BEFORE YOU CONTINUE

Dealer License
The following licenses are available through the Secretary of State's office:

- Auto Auction
- Automotive Salvage Recycler
- Converter Manufacturer
- Dealer New (franchise dealer)
- Dealer Used
- Distributor
- Manufacturer
- Transfer Dealer
- Watercraft New (franchise dealer)
- Watercraft Used

Unsure which license you need? Review our license application pages.

Background Check Requirement
All dealer owners and dealer managers must also complete a national criminal history background check. Instructions are available here.

License Fee
Your application will not be processed if the fee has not been paid. You may pay online at the time you submit your application.
You may also select the option to Mail Check and mail a check or money order to our office. Be sure to include your proposed dealer name on the check, as well as a sheet of paper describing what the payment is for and your contact information.

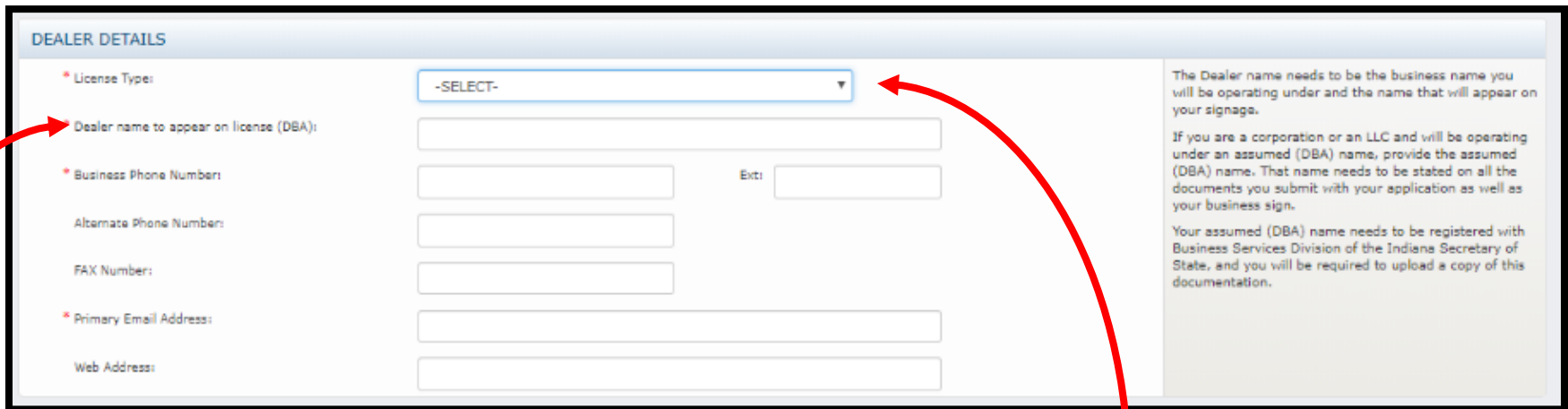
Help Guide
Step-by-step instructions are available here.
Help Line
A dealer account help line is available at: 317-576-2568.
Save as Draft
You will be able to save a draft of your application if you discover at any point that you need to gather additional information or documents.

Cancel **Continue**

This is the page that should appear when you click “License Application.”

Select “Continue” to proceed.

Dealer Details



The screenshot shows a web form titled "DEALER DETAILS". The form contains several input fields: "License Type" (a dropdown menu currently showing "-SELECT-"), "Dealer name to appear on license (DBA)" (a text input field), "Business Phone Number" (a text input field), "Alternate Phone Number" (a text input field), "FAX Number" (a text input field), "Primary Email Address" (a text input field), and "Web Address" (a text input field). There is also an "Ext:" label next to a smaller text input field. To the right of the form is a text box containing instructions: "The Dealer name needs to be the business name you will be operating under and the name that will appear on your signage. If you are a corporation or an LLC and will be operating under an assumed (DBA) name, provide the assumed (DBA) name. That name needs to be stated on all the documents you submit with your application as well as your business sign. Your assumed (DBA) name needs to be registered with Business Services Division of the Indiana Secretary of State, and you will be required to upload a copy of this documentation." Two red arrows originate from the bottom left of the page and point to the "License Type" dropdown and the "Dealer name to appear on license (DBA)" field.

- Select the license type that is most appropriate for your business. Additional info on each license type is available on our website under "[License Applications](#)."
- If a "Mobility" checkbox appears that means the license type is eligible for an Automotive Mobility Endorsement. Please select this box if you sell adapted vehicles or sell/install/service adaptive equipment.
- Enter the dealer name that will appear on your signage. This name will need to be on all the documents included with your application.

BUSINESS PHYSICAL ADDRESS

* Country: UNITED STATES ▼

* Address Line 1:

Address Line 2:

* Zip Code :

* City:

* State: INDIANA ▼

- This is the physical location where you will be operating your business.
- This address needs to be on all documents you submit with your application.
- This is the only address our office will send mail to.* Please be sure there is a mail receptacle on the property.
- Each location requires its own license.

**An exception is available if your location is not serviced by USPS*

| IDENTIFICATION NUMBER | |
|--|----------------------|
| * Federal Identification Number (FID): | <input type="text"/> |
| * Retail Merchant Number (TID): | <input type="text"/> |
| * Retail Merchant Location Number (LOC): | <input type="text"/> |

The federal identification number (also called an employer identification number or EIN) is issued to your business by the IRS. It must be on the Retail Merchant Certificate you submit with your application.

BUSINESS LOCATION

* The established place of business location is: Leased Owned

* Name of Lessor:

Email address of Lessor:

Phone Number of Lessor:

Address of Lessor:

* Country:

* Address Line 1:

Address Line 2:

* Zip Code:

* City:

* State:

- If your dealership location is leased, please provide the landlord's contact information.
- If you own the dealership location, these fields will disappear when you select "owned."

Navigation buttons

Cancel

- Returns you to the homepage **without** saving any data
- If you select “cancel” while you’re in a draft application, it will delete the draft

Save as Draft

- Returns you to the homepage after saving your data

Save and Continue

- Saves your data and moves you to the next page of the application



- You cannot jump forward through the application.
- You **can** jump back to view and edit sections you’ve already completed.

Business Entity Information

The screenshot shows a web form titled "ENTITY TYPE" and "ENTITY INFORMATION".

ENTITY TYPE

Select the one that indicates your type of business.

Type of Business Entity:

- SOLE PROPRIETORSHIP
- PARTNERSHIP
- CORPORATION
- LLC
- LLP
- LP

ENTITY INFORMATION

Legal Name of Business Entity:

Country:

Address Line 1:

Address Line 2:

Zip Code:

City:

State:

- If your business is an LLC or LLP, you must upload a copy of your certificate of organization issued by the Indiana Secretary of State.
- If your business is a corporation, you must upload a copy of your certificate of incorporation issued by the Indiana Secretary of State.
- If your business was organized or incorporated in a state other than Indiana, you must upload a copy of the out of state certificate and a certificate that your foreign business is registered to do business in the State of Indiana.

Owner + Manager Information

The image shows a screenshot of a web form titled "OWNER DETAILS". The form contains the following fields:

- First Name:** A text input field with a vertical cursor.
- Last Name:** A text input field.
- Suffix:** A dropdown menu with "--SELECT--" and a downward arrow.
- Title:** A dropdown menu with "--SELECT--" and a downward arrow.
- Year of Birth:** A text input field.
- Last 4 SSN:** A text input field.
- E-mail:** A text input field.
- Phone:** A text input field with a placeholder "(xxx) xxx-xxxx".

- Every dealer owner and dealer manager must be disclosed.
- If an owner is a business entity, please include both the business and the individual that will be submitting to a background check on behalf of the business.
- To enter a business, please follow the below steps:
 - Last 4 digits of Social = last 4 digits of FIN
 - First name = First word or name in the business entity name
 - Last name = All remaining words/names in the business entity name.
 - If there is no second word/name, then just the entity type will go here (LLC, Inc., etc.)
 - If you run out of room, you can shift portions of the name into the First Name field as needed.
 - Phone = The phone number of the individual submitting to a background check on behalf of the business

ADDRESS

* Country: UNITED STATES ▼

* Address Line 1:

Address Line 2:

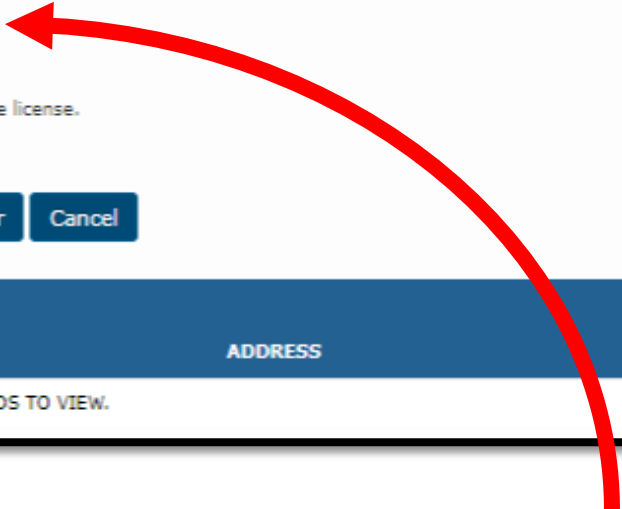
* Zip Code:

* City:

* State: INDIANA ▼

- To enter a business, please follow the below steps:
 - Address Lines = Principal Office Address
 - Zip Code = Principal Office Address
 - City= Principal Office Address
 - State = Principal Office Address

| DEALER NAME | ADDRESS | ACTION | | | |
|---|---------|--------|-------|---------|--------|
| NO RECORDS TO VIEW. | | | | | |
| <input type="radio"/> Yes <input checked="" type="radio"/> No Has this person had a dealer license suspended or revoked or had an application for a dealer license denied in this or any other state? | | | | | |
| <input type="radio"/> Yes <input checked="" type="radio"/> No Primary Owner? Only one (1) Owner can be designated as Primary. | | | | | |
| <input type="radio"/> Yes <input checked="" type="radio"/> No Print on License? You can select up to three(3) Owners to print on the license. | | | | | |
| <input type="button" value="Add Owner"/> <input type="button" value="Cancel"/> | | | | | |
| PRINT ON LICENSEE | PRIMARY | NAME | TITLE | ADDRESS | ACTION |
| NO RECORDS TO VIEW. | | | | | |



- The person that is designated as the primary owner will control access to the dealership's online portal.
- The primary owner will not need to be responsible for the day-to-day management of the online portal. The primary owner will have a chance to delegate authority to administrators once the account has been set-up.

Service of Process + Insurance + Bond

SERVICE OF PROCESS (SOP)

State the name and address (must be within Indiana) of the person upon whom legal services of process may be made.

Owner:

* Name:

* Title / Relationship to Applicant:

* Phone: Ext:

* Address Line 1:



Address Line 2:



* Zip Code:

* City:

State:

- If you have a Registered Agent, that is who you should list here.
- If you do not have a Registered Agent please provide the name and information of someone who can accept legal service on the dealership's behalf.

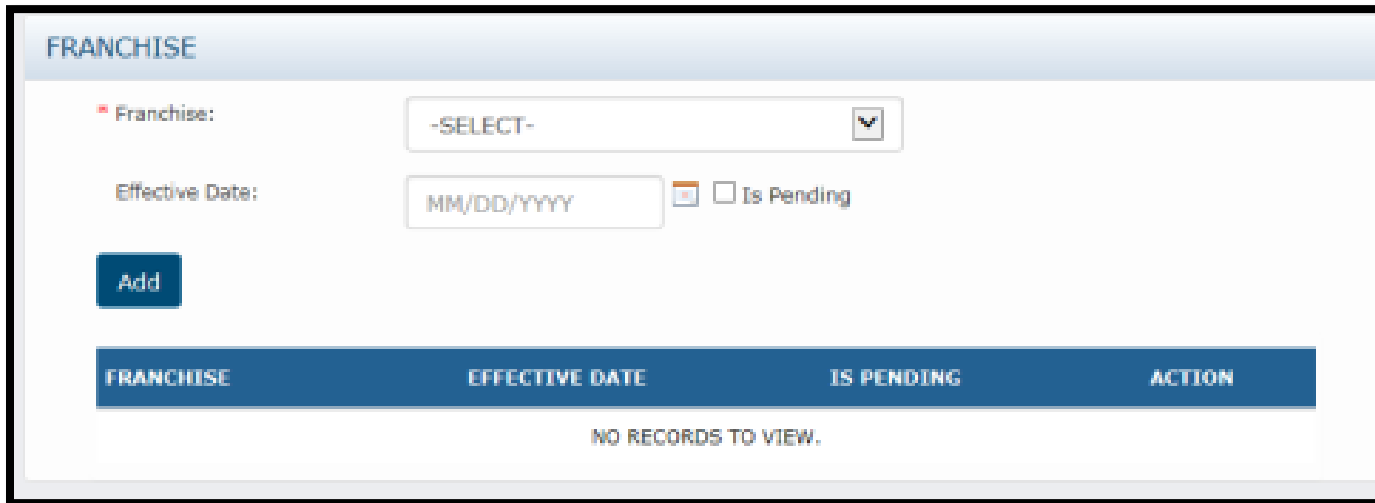
| INSURANCE DETAILS | |
|--|---|
| * Name of Insurance Carrier or Risk Retention Group: | <input type="text" value="-SELECT-"/> |
| * Policy Number: | <input type="text"/> |
| * Effective Date: | <input type="text" value="MM/DD/YYYY"/>  |
| * Date of Expiration: | <input type="text" value="MM/DD/YYYY"/>  |

| BOND DETAILS | |
|-------------------------|---|
| * Name of Bond Carrier: | <input type="text" value="-SELECT-"/> |
| * Bond Number: | <input type="text"/> |
| * Effective Date: | <input type="text" value="MM/DD/YYYY"/>  |
| * Date of Expiration: | <input type="text" value="MM/DD/YYYY"/>  |

- You will upload proof of bond and insurance at the end of the application process.
- **Insurance**
 - o Make sure the insured's name and address match the dealer name and address provided on your application and your signage.
 - o The "Certificate Holder" section of the Certificate of Liability must read:

Indiana Secretary of State's Office
Auto Dealer Services Division
302 W. Washington St., Room E-111
Indianapolis, IN 46204
- **Bond**
 - o The principal name and address must match the dealer name and address provided on your application and your signage.
 - o Both the bond company and the dealer owner must sign the form.

Hours of Operation + Franchise



The screenshot shows a web form titled "FRANCHISE". It contains the following elements:

- A "Franchise:" label followed by a dropdown menu currently showing "-SELECT-".
- An "Effective Date:" label followed by a date input field with the placeholder "MM/DD/YYYY" and a calendar icon.
- An "Is Pending" checkbox.
- An "Add" button.
- A table with the following columns: FRANCHISE, EFFECTIVE DATE, IS PENDING, and ACTION.
- Below the table, the text "NO RECORDS TO VIEW." is displayed.

- This field will only appear if you are selling new vehicles
- Please select "Is Pending" if the manufacturer will not grant a franchise before you have obtained a dealer license

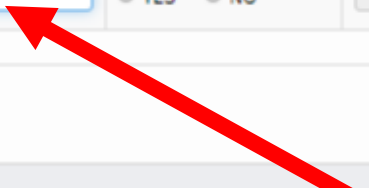
| ANTICIPATED HOURS OF OPERATION | | | |
|------------------------------------|----------------------|----------------------|---|
| DAY OF WEEK | FROM HOURS | TO HOURS | |
| <input type="checkbox"/> MONDAY | <input type="text"/> | <input type="text"/> | <input type="checkbox"/> BY APPOINTMENT |
| <input type="checkbox"/> TUESDAY | <input type="text"/> | <input type="text"/> | <input type="checkbox"/> BY APPOINTMENT |
| <input type="checkbox"/> WEDNESDAY | <input type="text"/> | <input type="text"/> | <input type="checkbox"/> BY APPOINTMENT |
| <input type="checkbox"/> THURSDAY | <input type="text"/> | <input type="text"/> | <input type="checkbox"/> BY APPOINTMENT |
| <input type="checkbox"/> FRIDAY | <input type="text"/> | <input type="text"/> | <input type="checkbox"/> BY APPOINTMENT |
| <input type="checkbox"/> SATURDAY | <input type="text"/> | <input type="text"/> | <input type="checkbox"/> BY APPOINTMENT |
| <input type="checkbox"/> SUNDAY | <input type="text"/> | <input type="text"/> | <input type="checkbox"/> BY APPOINTMENT |

- Sunday sales are only permitted for non-self-propelled motor vehicles

Dealer + Interim Plates

DEALER PLATES

| VEHICLE TYPE | DEALER PLATES REQUESTED? | HOW MANY DEALER PLATES? | MDC STICKER | INTERIM PLATES REQUESTED? | HOW MANY INTERIM PLATES? | ACTIONS |
|--|---|---|---|---|---|--|
| <div style="border: 1px solid #ccc; padding: 2px; display: inline-block;">-SELECT- ▼</div> | <input type="radio"/> YES <input checked="" type="radio"/> NO | <input style="width: 100%;" type="text"/> | <input style="width: 100%;" type="text"/> | <input type="radio"/> YES <input checked="" type="radio"/> NO | <input style="width: 100%;" type="text"/> | <div style="display: flex; justify-content: center; gap: 10px;"> <div style="background-color: #0056b3; color: white; padding: 5px 10px; border: 1px solid #0056b3;">Add</div> <div style="background-color: #0056b3; color: white; padding: 5px 10px; border: 1px solid #0056b3;">Cancel</div> </div> |



- You only need to select one “vehicle type” (1) selection for each license plate size/shape.
- **Example:** You do not need to make a selection for both “car” and “truck” because they both use a standard-sized license plate.
- You will be invoiced for plates after your license application has been approved.

| | |
|--------------------------------|--|
| Standard vehicle license plate | Car Truck RV Trailer |
| Motorcycle-sized license plate | Motorcycle Motor Driven Cycle A and B |

SALES INFORMATION

How many units do you expect to sell during the next twelve (12) months?

- Wholesale:
- Retail:
- Number of full-time sales person directly involved with selling:
- Number of other full-time employees:

This information is used by our examiners to determine your dealer plate limits.

Signature

The screenshot shows a web application interface for a license application. At the top, a dark header contains the text 'LICENSE APPLICATION - AFFIRMATION' on the left and a shopping cart icon with a red '0' and the text 'LOGOUT' on the right. Below the header is a horizontal progress bar with eight steps: INFORMATION, DEALER, BUSINESS ENTITY, OWNER, SOP (INSURANCE) BOND, DEALERSHIP INFORMATION, DEALER PLATES, AFFIRMATION (highlighted with a blue dot), and DOCUMENTS. The main content area is titled 'AFFIRMATION' and contains a text box with the following text: 'I hereby certify, under the penalty of perjury, that I am authorized to make this application and that the answers and information contained in this application are true and correct.' Below this text are two required input fields: '* Application prepared by:' and '* Title:'. At the bottom of the form, there are three buttons: 'Cancel', 'Save as Draft', and 'Save and Continue'. On the left side of the page, there is a vertical sidebar with icons and labels for 'MY DASHBOARD', 'ONLINE SERVICES', 'MY PROFILE', 'FIND MY DEALER LICENSES', 'FORMS', and 'CONTACT US'.

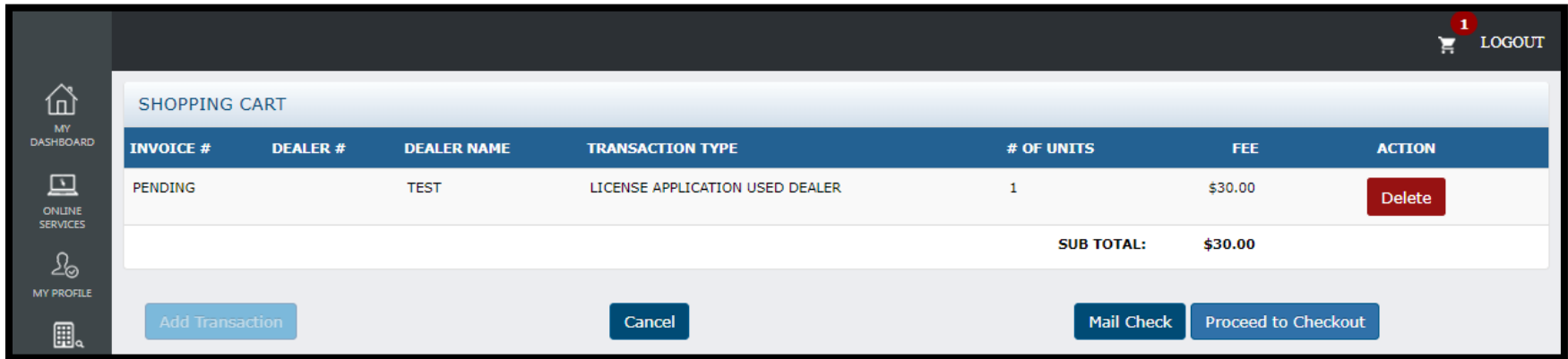
- You can jump back to any spot in the application to verify everything is correct.
- The required documents still need to be attached before the application is submitted to our office.

Required Documents

| REQUIRED DOCUMENTS | | |
|--------------------------------|---|---------------------------------------|
| DOCUMENT TYPE | DOCUMENT | ACTIONS |
| BUSINESS ORGANIZATION DOCUMENT | <input type="text" value="Choose File"/> No file chosen | <input type="button" value="Upload"/> |
| CERTIFICATE OF ASSUMED NAME | <input type="text" value="Choose File"/> No file chosen | <input type="button" value="Upload"/> |
| CERTIFICATE OF EXISTENCE | <input type="text" value="Choose File"/> No file chosen | <input type="button" value="Upload"/> |
| INSURANCE CERTIFICATE | <input type="text" value="Choose File"/> No file chosen | <input type="button" value="Upload"/> |
| OWNER ID | <input type="text" value="Choose File"/> No file chosen | <input type="button" value="Upload"/> |
| PHOTO | <input type="text" value="Choose File"/> No file chosen | <input type="button" value="Upload"/> |
| RETAIL MERCHANT CERTIFICATE | <input type="text" value="Choose File"/> No file chosen | <input type="button" value="Upload"/> |
| SURETY BOND | <input type="text" value="Choose File"/> No file chosen | <input type="button" value="Upload"/> |
| ZONING AFFIDAVIT | <input type="text" value="Choose File"/> No file chosen | <input type="button" value="Upload"/> |
| OTHER DOCUMENTS | | |
| | <input type="text" value="Choose File"/> No file chosen | <input type="button" value="Upload"/> |

- Additional documents and location photos can be uploaded here.
- You must select "Upload" to attach the document to the application.
- Each applicant has to submit photos of the following:
 - sales and storage lot
 - exterior advertising sign
 - display area
 - interior and exterior of the dealer office

Submitting and Tracking Your Application



The screenshot displays a web application's shopping cart. On the left is a dark sidebar with navigation icons for 'MY DASHBOARD', 'ONLINE SERVICES', and 'MY PROFILE'. The main content area is titled 'SHOPPING CART' and features a table with the following data:

| INVOICE # | DEALER # | DEALER NAME | TRANSACTION TYPE | # OF UNITS | FEE | ACTION |
|------------|----------|-------------|---------------------------------|------------|---------|--------|
| PENDING | | TEST | LICENSE APPLICATION USED DEALER | 1 | \$30.00 | Delete |
| SUB TOTAL: | | | | | \$30.00 | |

Below the table are four buttons: 'Add Transaction' (light blue), 'Cancel' (dark blue), 'Mail Check' (dark blue), and 'Proceed to Checkout' (dark blue). In the top right corner, there is a shopping cart icon with a red '1' notification and a 'LOGOUT' link.

- After you submit your application, you will be routed to this page
- You can pay online using a credit/debit card or e-check
- You also have the option of mailing a check. If you select this option please note the following:
 - o We will not begin processing your license application until we have received the check.
 - o Please include a note indicating what the check is for. We will return the payment (further delaying your application processing) if we cannot determine what the check is for.

| RECENT TRANSACTIONS | | | | | |
|--------------------------|-------------|---------------------------------|----------|----------------|------------|
| View All | | | | | |
| DEALER # | DEALER NAME | TRANSACTION TYPE | STATUS | WORK ORDER # | DATE |
| TBD | TEST | LICENSE APPLICATION USED DEALER | RECEIVED | 2019181620-001 | 10/22/2019 |

You can track the status of your license application by viewing the Recent Transactions box on your dealer portal.

Once your application is submitted, a Licensing and Compliance Clerk will review application for completeness and be in contact regarding any deficiencies. Once deemed “complete,” clerk will forward application to a Field Examiner who will more closely scrutinize whether or not the location meets all requirements. If approved by an examiner, application will be forwarded back to the clerk for license issuance. After the license has been issued, approved plates will be available for purchase through the dealer portal.