



Department of Commerce

Division of Real Estate & Professional Licensing

John R. Kasich, Governor
Jacqueline T. Williams, Director

Manufactured Home Dealer/Broker Application

Indicate Type of License:

- License options: New Manufactured Homes, Manufactured Home Broker, Used Manufactured Homes, Duplicate License. Includes fees for each.

Please type or print legibly. All fields are required.

Form with fields for Business Name, DBA or Fictitious Trade Name, Business Street Address, City, State, ZIP Code, County, Business Phone Number, Alternative Phone Number, Fax Number, and Email Address.

- Questions 1-4 regarding installer licensing, dealership compliance, other locations, and new makes to be sold.

Empty table with 6 columns for listing new makes to be sold.

- Question 5: Indicate style of business: Proprietorship, Partnership, Corporation, Business Trust, Limited Liability.

Question 6: Please list officers of your organization below.

Table for listing officers with columns for role, last name, first name, MI, home address, social security number, city, state, and ZIP code.

77 South High Street
20th Floor
Columbus, Ohio 43215
Rev. 4-2018

614-466-4100
Fax 614-644-0584
TTY/TDD 800-750-0750
com.ohio.gov/real
REPL-17-0022

<input type="checkbox"/>	Partner	Last Name	First Name	MI
<input type="checkbox"/>	Vice President			
<input type="checkbox"/>	Trustee	Home Address		Social Security Number
<input type="checkbox"/>	Director			
<input type="checkbox"/>	Member (Owning 10% or more)	City	State	ZIP Code
<input type="checkbox"/>				

<input type="checkbox"/>	Partner	Last Name	First Name	MI
<input type="checkbox"/>	Secretary			
<input type="checkbox"/>	Trustee	Home Address		Social Security Number
<input type="checkbox"/>	Director			
<input type="checkbox"/>	Member (Owning 10% or more)	City	State	ZIP Code
<input type="checkbox"/>				

<input type="checkbox"/>	Partner	Last Name	First Name	MI
<input type="checkbox"/>	Treasurer			
<input type="checkbox"/>	Trustee	Home Address		Social Security Number
<input type="checkbox"/>	Director			
<input type="checkbox"/>	Member (Owning 10% or more)	City	State	ZIP Code
<input type="checkbox"/>				

Ohio residents who are owners, partners, president, all members owning 10 percent or more, and all trustees **MUST** be electronically fingerprinted and have results forwarded to the Division of Real Estate & Professional Licensing, 77 S. High St., 20th Floor, Columbus, OH, 43215. Visit <http://www.ohioattorneygeneral.gov/Business/Services-for-Business/WebCheck/Webcheck-Community-Listing> for a complete listing of electronic fingerprinting locations in Ohio.

Only out-of-state applicants may submit a finger print card and exemption form in lieu of having their prints electronically scanned. Please contact the Division at 614-466-4100 to obtain a fingerprint card and an exemption form.

Manufactured Home Broker applicants are not required to submit fingerprints.

NOTE: Reason Code is "Other". Limited background checks run by the Division are solely for licensing purposes specifically addressed in Ohio Administrative Code 4781-11.

Answer each of the following questions truthfully to the best of your knowledge.

7. **Dealers:** I, as the applicant, (A) affirm that the business listed on this application has a net worth of at least \$75,000 (Net worth = assets minus liabilities), AND (B) has a \$25,000 Surety Bond which will be maintained during the entire period for which the license is held. Yes No

Brokers: I, as the applicant, (A)-affirm that I will maintain a special or bank trust account for the duration of my licensure AND (B) have a \$25,000 Surety Bond which will be maintained during the entire period for which the license is held. Yes No

8. Has the applicant, or any of the applicant's owners, partners, officers, members, directors or trustees:

A. Previously applied for a manufactured home dealer's license? Yes No – If yes, please list below:

Business Name Applied In	Date	Type of License	License Number – If Issued
Business Name Applied In	Date	Type of License	License Number – If Issued

B. Ever been refused such a license, or had it suspended or revoked? Yes No

9. Are you an owner, partner, corporate officer, member, trustee or director in any other new or used manufactured home dealership?

10. Have you or any of the applicant's partners, officers, members, trustees or directors:

A. Ever been convicted of a felony? Yes No

B. Ever been convicted of an offense that was related to the selling of, or dealing in, manufactured homes?
 Yes No

If you answered "yes" to either question A or B above, please provide the following information:

(1) The court's journal entry showing the final disposition of your conviction,

(2) The charge of which you were convicted.

(3) Please attach a short summary of the charge of which you were convicted.

C. Ever had a civil judgment rendered against you/him/her that resulted from the transaction of business as a manufactured home dealer, which remains unsatisfied today? Yes No

If you answered "yes" to question C above, please provide the following information:

(1) The court's journal entry showing the final disposition of the judgment;

(2) The court of jurisdiction that decided the civil judgment;

(3) That court's case number; and

(4) The date the civil judgment was issued.

Any arrest that is found on the criminal background check that cannot clearly be identified will require journal entries showing final disposition. **Failure to submit this information will result in a delay in the processing of the application.**

11. Will any business other than a licensed manufactured home dealer be operated from this proposed dealership location? (This includes a business operating from the building your office is housed in, any other building on the dealership's lot, or from the lot itself.) Yes No

If yes, what type of business is sharing the location, what is its business name and what is its relationship to this proposed manufactured home dealership? Please provide those answers on a separate sheet and submit with the application.

Business Name	License Number
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I also affirm that all statements in the foregoing application and in any attached sheets are true and correct and that I, as proprietor, as a partner, an officer, member or trustee, have authority to sign this application and to make the statements contained herein, and have read and understand the instructions and checklist, (REPL-17-0023).

Date of Application

X _____
Signature (Owner, Partner, President, Member or Trustee)

Title

Printed or Typed Name of Signee

*** \$3.50 eLicense system fee**

Notary:

Subscribed and sworn to before me this _____ day of _____ in the County of _____ State of _____.

(SEAL)

My commission expires _____

X _____
Notary Public

Make check payable to "Division of Real Estate & Professional Licensing." Fees are as follows, and are non-refundable: (Please DO NOT send cash)

License (Required)	1	@ \$250.00	\$250.00
Total Fees Due			

Mail application with payment, photographs and proof of bond to:

Division of Real Estate & Professional Licensing
77 S. High St.
20th Floor
Columbus, OH, 43215

Please note all dealer licenses renew on March 31 of odd years regardless of where the initial issue date falls.