ANNEX

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
RHODE ISLAND DEALERS' LICENSE & REGULATIONS OFFICE
DIVISION OF MOTOR VEHICLES
286 Main Street
Pawtucket, RI 02860
(401) 588-3020 EXT. 2076

ANNEX APPLICATION

SUMMARY INSTRUCTION SHEET – ALL OF THE FOLLOWING DOCUMENTS MUST BE SUBMITTED

IN ORDER TO APPLY FOR AN ANNEX LICENSE, YOUR PROPOSED ANNEX LOCATION MUST BE WITHIN TWO (2) DRIVEN MILES FROM YOUR "MAIN" LOCATION, AND MUST COMPLETE THE FOLLOWING:

1. ANNEX APPLICATION FORM COMPLETED IN FULL, SIGNED AND NOTARIZED.

2. 3-4 PICTURES OF THE OUTSIDE OF BUILDING FROM ALL DIFFERENT ANGLES, AND LOT DISPLAY AREA.

3. COPY OF CITY LICENSE (IF THE TOWN/CITY REQUIRES ONE). IF THE TOWN/CITY DOES NOT REQUIRE A LICENSE, WE MUST HAVE A LETTER OF ZONING APPROVAL STATING YOU MAY SELL MOTOR VEHICLES AT THAT LOCATION.

4. COPY OF A FORMAL ONE (1) YEAR LEASE (MINIMUM), SIGNED BY BOTH PARTIES OR PROOF OF OWNERSHIP, WHICHEVER APPLIES. SIGNED AND NOTARIZED.

REMEMBER: **CORPORATE OFFICERS, PARTNERS, OR OWNERS, MUST REMAIN EXACTLY THE SAME AS STATED ON THE MAIN LOCATION AT THE DEALERS' LICENSE & REGULATIONS OFFICE.**

AFTER THE ANNEX LICENSE IS GRANTED BY THE DEALERS' LICENSE & REGULATIONS OFFICE, WE MUST RECEIVE THE FOLLOWING DOCUMENTS TO FINALIZE AND ISSUE THE ANNEX LICENSE, AS STATED WITHIN THIRTY (30) DAYS.

1. PICTURE OF THE 24 SQUARE FEET SIGN STATING THE EXACT DEALRSHIP NAME WITH THE WORD "ANNEX".

2. $15,000 SURETY BOND UNDER THE ANNEX LOCATION: OR A RIDER DOCUMENT ON THE PRESENT BOND YOU HAVE ON THE MAIN LOCATION, TO AMEND THAT BOND TO INCLUDE THE ANNEX LOCATION (STATING THE ADDRESS OF THE ANNEX) .

3. $100.00 LICENSE FEE.

4. BUSINESS TELEPHONE NUMBER AT THE ANNEX LOCATION.

ANY APPLICATION NOT COMPLETED AFTER SIXTY (60) DAYS, IS CONSIDERED "VOID" AND A NEW APPLICATION IS REQUIRED.

THANK YOU FOR YOUR COOPERATION!

Charles F. Dolan
ADMINISTRATOR, DIVISION OF MOTOR VEHICLES

ANNEX

STATE OF RHODE ISLAND
RHODE ISLAND DEALERS' LICENSE & REGULATIONS OFFICE
DIVISION OF MOTOR VEHICLES
286 MAIN STREET - ROOM 307
PAWTUCKET, RHODE ISLAND 02860

APPLICATION FOR MOTOR VEHICLE DEALER'S LICENSE

Date:_____

1. Name of firm:_____
2. Principal business location:_____
   Business phone number:_____
3. Location of branch offices (if any):_____
   _____
4. Type of Dealer:
   New vehicles only ( ) Used vehicles only ( ) New & used vehicles ( )

4a. If new car dealer, estimate number of dealers selling same make of car in your city or town:_____

5. Type of Vehicles:
   Passenger cars only ( ) Motorcycles ( )
   Trucks only ( ) Tractor-Trailers ( )
   Passenger cars & trucks ( )
6. How long have you been established as a dealer?_____
7. If a new car dealer, what make of vehicles?_____
8. Have you a dealer's Contract or Franchise? Yes ( ) No ( )
9. Franchise or Contract:
   Name:_____ Address:_____ Date:_____
   _____
   _____
10. Floor Space: Sales_____ Service_____
    Yard Space: Sales_____ Service_____
    Value of service station equipment:_____
11. Give names and addresses of all officers and members of firm:
    Title: Name: Residence Address:
    _____
    _____
    _____
    _____
12. Number of salesmen employed:_____
13. Business References:_____
    _____
    _____

I, the undersigned, hereby declare that I am_____ of the
Title if any
above firm and that the above information is true to the best of my knowledge or belief.

Written signature of applicant_____

State of Rhode Island
County of_____
Subscribed and sworn to before me this____day of_____20____

_____
Notary Public

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
MOTOR VEHICLE DEALERS' LICENSE & REGULATIONS OFFICE
286 MAIN STREET - ROOM 307
PAWTUCKET, RHODE ISLAND 02860

DEALERSHIP BUSINESS (LICENSED) NAME:_____

LIST ALL EMPLOYEES WHO ARE PRESENTLY ON YOUR PAYROLL AND RECEIVING W-2 FORMS:

NAME:_____ S.S.# OR DRIVERS LICENSE#:_____

NAME:_____ S.S.# OR DRIVERS LICENSE#:_____

NAME:_____ S.S.# OR DRIVERS LICENSE#:_____

NAME:_____ S.S.# OR DRIVERS LICENSE#:_____

NAME:_____ S.S.# OR DRIVERS LICENSE#:_____

NAME:_____ S.S.# OR DRIVERS LICENSE#:_____

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NAME:_____ S.S.# OR DRIVERS LICENSE#:_____

NAME:_____ S.S.# OR DRIVERS LICENSE#:_____

NAME:_____ S.S.# OR DRIVERS LICENSE#:_____

NAME:_____ S.S.# OR DRIVERS LICENSE#:_____

NAME:_____ S.S.# OR DRIVERS LICENSE#:_____

TOTAL NUMBER OF EMPLOYEES LISTED:_____

HAVE YOU OR ANY OF YOUR EMPLOYEES HAD CRIMINAL CHARGES LODGED AGAINST THEM IN COURT? YES____NO____, IF YES, PLEASE EXPLAIN IN DETAIL ON ADDITIONAL SHEET.

IF DURING THE YEAR, ADDITIONAL EMPLOYEES ARE ADDED TO YOUR DEALERSHIP, YOU MUST NOTIFY THIS OFFICE IMMEDIATELY TO COMPLETE THE NECESSARY FORMS.

I, THE UNDERSIGNED, HEREBY DECLARE UNDER THE PENALTY OF PERJURY, THAT I HAVE EXAMINED THIS STATEMENT REGARDING THE NUMBER OF EMPLOYEES, AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, STATE THIS STATEMENT HEREIN IS TRUE AND CORRECT. RHODE ISLAND GENERAL LAWS 31-11-17.

_____
SIGNATURE OF OWNER, PARTNER OR CORPORATE OFFICER

STATE OF RHODE ISLAND

COUNTY:_____

SUBSCRIBED AND SWORN TO BEFORE ME THIS____DAY OF_____20____

_____
NOTARY PUBLIC

COMMISSION EXPIRES:_____

EMPLOYEES NOT LISTED ON THIS FORM, REQUIRE A WAIVER FROM WORKERS' COMPENSATION
EXEMPTIONS INCLUDE THE FIRST FOUR (4) CORPORATE OFFICERS

WORKERS' COMPENSATION INSURANCE
UNIVERSAL COVERAGE

EFFECTIVE JANUARY 1, 1999 - IMPORTANT WORKERS' COMPENSATION LAW CHANGE

All Rhode Island employers with one or more employees are required to obtain workers' compensation insurance coverage. This includes both full time and part-time workers. Sole Proprietors, partners and the first four corporate officers are **not** included. The first four corporate officers are the President, (one) Vice-President, Secretary and Treasurer as listed with the annual corporate report to the Secretary of State, Corporations Division. The four corporate officers **can be included,** if they choose, by filing a form DWC11-C with the Department of Labor and Training, Division of Injured Workers' Services.

Some exemptions to the insurance coverage requirement are: Domestic servants, some farmers and farm laborers, some arborists and nursery personnel and certain real estate persons.

The penalty for failure to provide workers' compensation insurance coverage has also changed. The civil/administrative penalty can be $500 to $1,000 per day of non-compliance. The maximum penalty of three times the amount of premium has been removed. Another major change is that the Director of the Department of Labor and Training may close a business for failure to provide workers' compensation insurance. The penalties are imposed after a Lack of Insurance Hearing.

An employer may appeal the decision at the Workers' Compensation Court or if the employer does not comply with the order, the Department brings the case to the Workers' Compensation Court for further action. Prosecution for criminal charges are referred to the Department of Attorney General.

For further information on compliance & enforcement, please contact 462-8100 - e-mail at jfal735@aol.com or contact an Education Unit Representative at 222-3994.

LIST ALL EMPLOYEES PROTECTED BY WORKERS' COMPENSATION INSURANCE COVERAGE:

TOTAL NUMBER OF EMPLOYEES LISTED:_____

NAME:_____ S.S.# OR DRIVERS LICENSE#:_____

NAME:_____ S.S.# OR DRIVERS LICENSE#:_____

NAME:_____ S.S.# OR DRIVERS LICENSE#:_____

NAME:_____ S.S.# OR DRIVERS LICENSE#:_____

NAME:_____ S.S.# OR DRIVERS LICENSE#:_____

NAME:_____ S.S.# OR DRIVERS LICENSE#:_____

(USE ADDITIONAL SHEETS IF MORE SPACE IS REQUIRED)

_____
SIGNATURE OF OWNER, PARTNER OR CORPORATE OFFICER

STATE OF RHODE ISLAND
COUNTY OF:_____

SUBSCRIBED AND SWORN TO BEFORE ME THIS____DAY OF_____20____
NOTARY PUBLIC:_____ MY COMMISSION EXPIRES:_____

DATE

1. Give the precise area in measurements to be utilized for sale of vehicles. Building and outside display area.

2. This form and application must be complete before it will be accepted.

NAME OF DEALERSHIP

LOCATION

PRINT NAME AND POSITION

SIGN NAME AND POSITION

BUILDING

A. Measurements of the building to be used for Auto Sales only.

B. Must be 2,400 sq. ft., 4,800 sq. ft. if you have a body shop.

C. Please show garage doors and entrance to building.

OUTSIDE DISPLAY AREA

1. Must be 2,400 sq. ft. to be used only for sale of vehicles 4,800 sq. ft. if you have a body shop.

2. Please show entrance and exits of display area.