



**VEHICLE AUCTION**  
**INITIAL/REACTIVATION AND LICENSE CHANGE APPLICATION**

INSTRUCTIONS AND REQUIREMENTS

Before completing any part of this application, make sure this is the **most recent** version by comparing it with the one posted on the Board's website.

This application and all required documents must be submitted to the **Vehicle Board at PO Box 2649; Harrisburg, PA 17105-2649**. All vehicle auction licenses expire May 31<sup>st</sup> of each odd numbered year. DELAYS may occur in the processing of this application if submitted during the beginning of the license renewal period (March 1 of odd-numbered year and July 1 of the same year). Upon receipt of a correctly completed application and all required documents, your application will be processed as soon as possible.

**INSTRUCTIONS**

- Application responses must be typed or printed neatly in black or blue ink.
- **ALL questions in ALL sections MUST be answered completely and truthfully.** Statements are made under oath and are subject to Board investigation. Falsification of answers or failure to answer any question may constitute grounds for refusing or taking disciplinary action against a license.
- **Attach** the following documents to this application:

1. **A check or money order (cash is not acceptable)** for the amount below made payable to the Commonwealth of Pennsylvania

\$65.00 Initial Licensure  
\$65.00 Ownership Change\*  
\$60.00 Physical Address Change  
\$60.00 Change of Office (same location)  
\$30.00 Post Office Address Change  
\$30.00 Business Name Change

**❖ REACTIVATION OF AN EXPIRED LICENSE = \$240.00**

**\*Ownership change DOES NOT:**

include addition/deletion of owner(s)/officer(s) to an existing ownership group. To add or delete individual owners from an existing ownership group, follow items #7 - #9 in the instructions.

**\*Ownership change DOES:**

include changing the ownership structure of a dealership (i.e. from sole proprietorship to corporation, etc.) even if there is no change in the principals involved.

The application fee is **NON-REFUNDABLE** and **NON-TRANSFERABLE** regardless of the issuance of a license. A \$20.00 processing fee will be charged for any unpaid returned check regardless of the reason.

2. Photographs of the auction facility showing:
  - A. Complete overall view showing display area and office. Office must be permanent and adjacent to surfaced display area. Photograph must show auction is separated from any adjoining business or residences.
  - B. Auction sign either permanently affixed to the building or permanently erected in the outdoor display area that shows the licensed name of the auction as it appears on this application and is visible to the public. Name must not be misleading (i.e., gas station, body shop, salvage, towing, etc.) and should present to the public that the facility is a vehicle auction. The name of the auction cannot designate rental, leasing, wholesale, broker or brokering.
  - C. Sign displaying business hours and days the auction is open.

3. Copy of a deed if you own the property or lease agreement showing that the property has been rented for a minimum of six (6) months to show you have an established place of business. ***If the deed has a location description that does not indicate the address of the property, please submit an affidavit indicating that the location description in the deed is that of the auction location.*** The lease must disclose the address of the facility that is being leased.
4. A copy of a telephone bill or letter from telephone company verifying installation of a single business landline telephone ***at the proposed auction address with the telephone number listed under the auction's licensed name.***
5. Documentation from your local municipality verifying that your business location has proper zoning.
6. A copy of Certificate of Occupancy issued by the Department of Labor and Industry (717-787-3806) or a copy of the letter of compliance or use and occupancy permit from the city or municipality in which the auction is located.
7. A work history (resume) for each owner, partner, officer or member to establish the reputation in business of the applicant for the past five (5) years, if applicable.
8. A **COMPLETED** State Police Background Check (Request for Criminal History Check) for each owner, partner, officer and director regardless if they have a conviction or not, **FROM EACH STATE IN WHICH EACH INDIVIDUAL HAS RESIDED IN THE FIVE YEARS IMMEDIATELY PRECEDING THE DATE OF THE APPLICATION.** If you answer **YES** to question 14e on the application, then you must submit a completed State Police Background Check from the state in which the conviction occurred regardless of whether you have ever resided in that state. Background checks that reflect "Request under Review" will not be accepted.
  - Criminal record checks for Pennsylvania residents may be obtained on-line at <https://epatch.state.pa.us> or by mail by contacting the Pennsylvania State Police. Note that the turnaround time for on-line applications is faster than mailed applications.
  - **Out-of-state** residents should consult the Board's web page for information about obtaining an out-of-state background check at: [www.dos.pa.gov/vehicle](http://www.dos.pa.gov/vehicle), click on General Board Information then click on Criminal Record Check.
  - Criminal record checks must be received within 90 days of the application date and must display the social security number and birth date of the individual. Those older than 90 days will be returned for new submissions. In the interim, the application will not be processed.
  - Any questions about your background check should be directed to the State Police.
  - If any owner, officer, member or partner has been convicted\* of a *felony* or *misdemeanor* offense (summary offenses are not included), submit the following information for EACH conviction, **regardless** of the time elapsed since the conviction:
    - Copies of the criminal complaint and affidavit of probable cause, criminal information or indictment, sentencing order, and transcript of a guilty plea colloquy, if any, certified by the court in the county where the conviction occurred;\*\*
    - If the court documents do not categorize the offense as a felony or misdemeanor, a letter from the Court explaining the grading of the offense;
    - A letter from the Probation Office, on agency letterhead, **signed and dated within 90 days** of receipt in the Board office, providing the current probationary status and/or completion date (if applicable)\*\*;
    - Employment history or resume;
    - A detailed description (in applicant's own words) of the circumstances surrounding the conviction, the basis for the conviction, and the disposition of the conviction;
    - A letter from a previous employer and/or business associate, on company letterhead, attesting to his/her knowledge of the conviction, **signed and dated within 90 days** of receipt in the Board's office;
    - Two letters of reference from individuals not related to or residing with the applicant attesting to the applicant's character, **signed and dated within 90 days** of receipt in the Board office.

**\*For purposes of these instructions**, a conviction includes a finding or verdict of guilt, a plea of guilty or *nolo contendere*, or a disposition of probation without verdict, disposition in lieu of trial, or Accelerated Rehabilitation Disposition. The Board will not deny a license based upon a disposition of PWV, disposition in lieu of trial or ARD, but will monitor the applicant's compliance to confirm that the disposition is not changed to a conviction after the license has been issued.

**\*\*If the required documents are not available**, please provide an original letter on business letterhead, **signed and dated within 90 days** of receipt in the Board's office, from the proper authority confirming documents are not available.

9. A notarized statement from the officer, partner or member being **deleted** verifying that the individual will no longer be involved with the auction and the date of disassociation, if applicable.
10. **FORMATION DOCUMENTATION.** Attach the applicable documentation from the Pennsylvania Corporation Bureau:
  - **Corporations**
    - a. For **Pennsylvania** corporations--a **photocopy of the approved articles of incorporation.**
    - b. For **out of state** corporations--a **photocopy of the certificate of authority to do business as a foreign corporation.**
    - c. If the corporation is doing business under a **fictional name**, also include a **photocopy of the approved fictional name registration.** *The corporation's name must specifically appear on the fictional name registration.*
  - **Limited Liability Companies and Partnerships**
    - a. For **Pennsylvania** companies and partnerships--a **photocopy of the approved certificate of registration.**
    - b. For **out of state** companies and partnerships --a **photocopy of the certificate of authority to do business as a foreign limited liability company or partnership.**
    - c. If the Limited Liability Company or Partnership is doing business under a **fictional name**, also include a **photocopy of the approved fictional name registration.** *The Limited Liability Company or Partnership's name must specifically appear on the fictional name registration.*
  - **Sole Proprietorship**
    - a. If the sole proprietorship is doing business under a **fictional name**, also include a **photocopy of the approved fictional name registration.** *The applicant's personal name must specifically appear on the fictional name registration.*

Questions about entity filings should be directed to the Corporation Bureau, Department of State, Harrisburg, PA 17120, (717) 787-1057.

**ISSUANCE OF LICENSES.** Once approved, the entity's license will be mailed to the business address listed on the application.

**PLEASE NOTE:**

- **STREET ADDRESSES.** Licenses will only be issued to street addresses. A post office box number may be included in addition to the street address, as long as the both share the same zip code.
- **OFFICE INSPECTION.** An office inspection will be required prior to issuance of your license. If the auction fails inspection for any reason, a **\$45.00** fee is required before a re-inspection can be scheduled.
- **UNTIL A TEMPORARY PERMIT IS ISSUED FOLLOWING INSPECTION, THE ENTITY MAY NOT CONDUCT BUSINESS OR ADVERTISE.**
- **SUBSEQUENT DISCIPLINARY ACTION OR CRIMINAL CONVICTION.** If disciplinary action is taken against the license of the entity or any officer, member, partner or owner at any time following the date of the criminal background checks, these actions must be reported to the Board within 30 days of the action. Refusal of licensure or disciplinary action may result from these actions or the failure to make a timely report.
- To check the status of your application or apply online visit [www.mylicense.state.pa.us](http://www.mylicense.state.pa.us)

- If a pending application is older than one year from the date submitted online or the paper application is signed by the applicant and the applicant wishes to continue the application process, the Board shall require the applicant to submit a new application including the required fee.
- In order to complete the application process, many of the supporting documents associated with the application cannot be more than 6 months old (from the date of issuance). All background check documents cannot be older than 90 days old (from the date of issuance).
- The Board will retain a copy of all old application records and attachments. Applicants will be notified of the above timeframes for pending applications.

## **YOU MAY NOT PRACTICE AS A VEHICLE AUCTION UNTIL LICENSED BY THE BOARD**

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### **IMPORTANT PENNDOT CONTACT INFORMATION**

If you have any questions regarding the following, please use the telephone numbers given below:

Plates / Tags: 1-800-932-4600

**IF this is for dealer plates/dealer renewals: 717-787-7207 or 717-787-7318**

Titles: 1-800-932-4600

Vehicle Registration: 1-800-932-4600

Inspection Stations: **717-787-2895** or refer to the website <http://www.dmv.pa.gov>

Dealer Approvals: **717-787-7207** or **717-787-4291**

Salvage: 1-800-932-4600

The PENNDOT Dealer Section does not process regular plates/tags, title work, or vehicle registrations. Salvage Certificates are also not processed in this area, unless going through the abandoned vehicle process. If you are inquiring about becoming a **salvage dealer** or **salvage dealer plates**, please contact either **717-787-7207** or **717-787-4291**



**VEHICLE AUCTION  
INITIAL/REACTIVATION AND LICENSE CHANGE APPLICATION**

This application is for:  CORPORATION  LIMITED LIABILITY COMPANY  
 PARTNERSHIP  SOLE PROPRIETORSHIP

1. Applicant's Name: \_\_\_\_\_  
(Name of Corporation, Limited Liability Company, Partnership, if Sole Proprietorship, use Personal Name)
2. Applicant's Trade Name: \_\_\_\_\_  
(Name under which Applicant will conduct business)
3. Business address: \_\_\_\_\_  
(STREET) (CITY) (COUNTY) (STATE & ZIP CODE)  
*(You **MUST** provide a physical location (street) address in addition to any route or post office address.)*
4. Applicant's email address: \_\_\_\_\_
5. Applicant's website address: \_\_\_\_\_
6. Vehicle Auction License Number: \_\_\_\_\_  
*(Only to be used if applying for a change)*
7. Telephone number of the auction: ( \_\_\_ \_\_\_ \_\_\_ ) \_\_\_ \_\_\_ \_\_\_ - \_\_\_ \_\_\_ \_\_\_
8. Person to contact at auction: \_\_\_\_\_
9. Telephone number to contact above person between the hours of 8:00 am and 5:00 pm \_\_\_\_\_

10. Officer /Member / Partner information: *If an individual is the sole owner/officer, indicate that below*

NAME	TITLE (Circle one)	HOME ADDRESS	SSN	HOME TELEPHONE #
	President/Partner/ Member/Owner			
	Vice President/Partner/ Member/Owner			
	Treasurer/Partner/ Member/Owner			
	Secretary/ Partner/ Member/Owner			

a) List previous home addresses for the past five years for officers / members / partners (*must be completed*):

NAME	PREVIOUS HOME ADDRESSES FOR THE PAST FIVE YEARS	NAME	PREVIOUS HOME ADDRESSES FOR THE PAST FIVE YEARS

11. Type of auction (*check one*):  
 Wholesale Vehicle Auction                       Public or Retail Vehicle Auction
12. How long has this auction been in operation? \_\_\_\_\_
13. Has any owner, partner, member or officer ever applied previously with this Board for a:  
 Salesperson license             YES  NO            If yes, provide license number \_\_\_\_\_  
 Dealer license                     YES  NO            If yes, provide license number \_\_\_\_\_  
 Auction license                    YES  NO            If yes, provide license number \_\_\_\_\_
14. a. Does any officer, partner, member and/or owner hold, or have they ever held, a license, certificate, permit, registration or other authorization to practice a profession or occupation in any state or jurisdiction?  
 YES  NO    If YES, please provide the profession and state or jurisdiction. \_\_\_\_\_
- b. Has any officer, partner, member and/or owner had disciplinary action taken against a professional or occupational license, certificate, permit, registration or other authorization to practice a profession or occupation issued to them in any state or jurisdiction or have they agreed to voluntary surrender in lieu of discipline?  
 YES  NO
- c. Does any officer, partner, member and/or owner currently have any disciplinary charges pending against their professional or occupational license, certificate, permit or registration in any state or jurisdiction?  
 YES  NO
- d. Has any officer, partner, member and/or owner withdrawn an application for a professional or occupational license, certificate, permit or registration, had an application denied or refused, or for disciplinary reasons agreed not to apply or reapply for a professional or occupational license, certificate, permit or registration in any state or jurisdiction?  
 YES  NO
- e. Has any officer, partner, member and/or owner been convicted (found guilty, pled guilty or pled nolo contendere), received probation without verdict or accelerated rehabilitative disposition (ARD), as to any criminal charges, felony or misdemeanor, including any drug law violations? Note: You are not required to disclose any ARD or other criminal matter that has been expunged by order of a court. *If YES, please refer to the above instructions concerning the submission of a completed State Police Criminal Background Check.*  
 YES  NO
- f. Does any officer, partner, member and/or owner currently have any criminal charges pending and unresolved in any state or jurisdiction?  
 YES  NO

15. **IF YOU HAVE A LAPSED LICENSE**, submit a check or money order in the correct amount shown in Section #1 or Section #2 below, made payable to "Commonwealth of PA". To avoid any additional late renewal fees, return this form and your check or money order immediately. *\*\*If you have been practicing as a vehicle auction in Pennsylvania on an expired or inactive license, you may be subject to possible disciplinary action as well as being assessed additional late renewal fees.*  
**YOU MUST CHECK THE BOX IN SECTION #1 OR SECTION #2 BELOW OR THIS APPLICATION WILL BE RETURNED TO YOU UNPROCESSED.**

Section #1	Section #2
<p>If you have practiced as a vehicle auction in Pennsylvania at any time since the expiration/inactive date of your license, you are subject to late renewal fees (\$5.00 per month) in addition to all required biennial renewal fees. A fee of \$240.00 plus late renewal fees of \$5.00 per month are required if you have practiced as a vehicle auction in Pennsylvania since the expiration/inactive date of your license.</p>	<p>If the auction did <u>not</u> practice as a vehicle auction in Pennsylvania since the expiration/inactive date of the license, submit the total fee of \$240.00. To verify that the auction has been inactive in Pennsylvania since the expiration/inactive date of the license, you must complete this section of this application. <b>NOTE: If the auction has practiced at any time during this period, you may be subject to late renewal fees.</b></p>
<p><b>YES, THE AUCTION PRACTICED AFTER THE LICENSE EXPIRED/INACTIVE (FROM ___ / ___ / ___ TO ___ / ___ / ___) AND I WISH TO REACTIVATE THE LICENSE AT THIS TIME BY PAYING THE BIENNIAL RENEWAL FEE PLUS APPLICABLE LATE FEES.</b></p> <p style="text-align: right;"><input type="checkbox"/></p>	<p><b>NO, THE AUCTION DID NOT PRACTICE AT ANY TIME AFTER THE LICENSE EXPIRED/INACTIVE AND I WISH TO REACTIVATE THE LICENSE AT THIS TIME BY PAYING THE BIENNIAL RENEWAL FEE OF \$240.00.</b></p> <p style="text-align: right;"><input type="checkbox"/></p>

16. Application fee is for (*check all that apply*):

<input type="checkbox"/>	<b>Initial Licensure</b> (First time applicants)	<b>\$65.00</b>
<input type="checkbox"/>	<b>Ownership Change</b> (Return VB license)	<b>\$65.00</b>
	List Previous Owners: _____	
<input type="checkbox"/>	<b>Physical Address Change</b> (Return VB license)	<b>\$60.00</b>
	List Previous Address: _____ _____	
<input type="checkbox"/>	<b>Change of Office at Same Location</b>	<b>\$60.00</b>
<input type="checkbox"/>	<b>Post Office Address Change</b> (Return VB license and submit a copy of the Post Office letter)	<b>\$30.00</b>
	List Previous Address: _____ _____	
<input type="checkbox"/>	<b>Business Name Change</b> (Return VB license)	<b>\$30.00</b>
	List Previous Business Name: _____	
<input type="checkbox"/>	<b>Reinstatement of VB</b> _____	<b>\$240.00</b>

**NOTE:** The application fee is **NON-REFUNDABLE** and **NON-TRANSFERABLE** regardless of the issuance of a license. A \$20.00 processing fee will be charged for any unpaid returned check regardless of the reason for non-payment.

17. **APPLICANT'S CERTIFICATION**

*(This application must be signed by all owners, officers, partners and/or members of the dealership)*

I hereby certify that I have read the Board of Vehicles Act, Act of December 22, 1983, P.L. 306, No. 84, as amended, 63 P.S. §§818.1 – 818.37, and the Board's regulations, 49 Pa. Code §§19.1 – 19.38, and that I will abide by the Act and the regulations while practicing in the Commonwealth of Pennsylvania.

I/we certify that I/we have met all facility requirements and all information supplied in this application is true and correct to the best of my/our knowledge and belief.

I/we understand that any false statement made is subject to the penalties of 18 Pa.C.S. Section §4904 relating to unsworn falsification to authorities and may result in the suspension or revocation of the license.

I/we verify that this form is in the original format as supplied by the Department of State and has not been altered or otherwise modified in any way. I am aware of the criminal penalties for tampering with public records or information pursuant to 18 Pa.C.S. Section §4911.

_____ Owner, Officer, Partner, or Member's Signature	_____ Print Name	_____ Date
_____ Owner, Officer, Partner, or Member's Signature	_____ Print Name	_____ Date
_____ Owner, Officer, Partner, or Member's Signature	_____ Print Name	_____ Date
_____ Owner, Officer, Partner, or Member's Signature	_____ Print Name	_____ Date

Disclosing your Social Security Number on this application is mandatory in order for the State Boards to comply with the requirements of the Federal Social Security Act pertaining to Child Support Enforcement, as implemented in the Commonwealth of Pennsylvania at 23 Pa.C.S. § 4304.1(a). At the request of the Department of Human Services (DHS), the licensing boards must provide to DHS information prescribed by DHS about the licensee, including the social security number.

I authorize the following organization and its employees to act as my agent to file this application on my behalf, and to receive correspondence and communications from the Board. I understand that the Board will also send copies of communications directly to me.

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Name of Organization

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Address of Organization

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Contact Person at Organization

Telephone Number

Fax Number

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Signature of Applicant

Print Name

Telephone Number

Fax Number

I accept authorization of the applicant to act as agent for the submission of this application and to receive correspondence and communication from the Board. I understand that the Board will also send copies of communications directly to the applicant.

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Signature of Contact Person

Print Name

Telephone Number

Fax Number

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