



MARYLAND DEPARTMENT  
OF TRANSPORTATION

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MOTOR VEHICLE  
ADMINISTRATION

# ***Business Licensing***



# ***Packet***

## Title Service Agent License Application Instructions

Thank you for your interest in obtaining a Maryland Title Service Agent License. It is our intent to help you obtain your license as quickly as possible. If assistance is needed, please e-mail the Motor Vehicle Administration Business Licensing Division at [mvablcsd@mva.maryland.gov](mailto:mvablcsd@mva.maryland.gov). To obtain a Title Service Agent License packet, you may visit the Business License Information website at [www.mva.maryland.gov](http://www.mva.maryland.gov). For more information on state and local licensing requirements, visit [www.dsd.state.md.us](http://www.dsd.state.md.us) for Code of Maryland Regulations (COMAR) and Maryland Vehicle Law is available online at [www.lawlib.state.md.us](http://www.lawlib.state.md.us). Note: Failure to complete the application and submit the required documents will result in your application being rejected.

### Getting Started:

You will need to obtain the following:

- **Zoning Approval Form (CS-053)** — This form must be presented to the Zoning Board in the County/City where your business is located. A representative of the Zoning Board must complete the lower portion of this form.
- **Department of Assessment and Taxation** — Form/letter that verifies you are registered to do business in the State of Maryland using the name(s) indicated on your application. Both your corporate and trade names must be registered. The Department of Assessment and Taxation is located at 301 W. Preston Street, Baltimore, Maryland 21201. You may contact them by telephone at 410-767-1330, 1331, or 1332 or visit their website at <http://www.dat.state.md.us/sdatweb/sdatforms.html>
- **Completed Site Inspection** — Prior to becoming licensed, an investigator will go to your place of business and inspect your location to ensure compliance with the Maryland Code of Regulations (COMAR). To schedule your site inspection, please contact MVA Investigation Division at 410-768-7216. Upon approval of your site inspection, the investigator will initial your application and will check that you either passed or failed the inspection.
- **Business Licensing Orientation Request** — Before a license can be issued, you **must** attend a business licensing orientation. Please complete the form and submit to the Business Licensing and Consumer Services Division. The orientation is held monthly from 9:00 a.m. – 12:00 noon. All applicants will be scheduled for the next available class.
- **License Fee** — \$112.50 for a 2 year license.

### Next Step:

Once the above documents are completed, submit your application and appropriate fees along with the following:

- **ERT Contract** — All new licensees are required to contract with an Electronic Registration and Titling (ERT) provider. A copy of your ERT contract is required to be submitted along with your completed application. For vendor contact information, please visit <http://www.mva.maryland.gov/Business-Services/ert.htm>
- **Criminal Background Check** — All applicants/licensees must submit a Criminal Background Check. If you live or have lived in another state within the last year, you must provide a criminal record from that state in addition to the Maryland record check.
- **Surety Bond of Title Service Agent (CS-071)** — The bond required is \$50,000. The bond **must** be in the full name of the Title Service including any trade name. It must reflect the full name of all officers, partners, or owners exactly as shown on the application. A bond is required for each licensed business entity.
- **Workers' Compensation** — If you have Workers' Compensation Insurance, complete information requested on the Application for Title Service Agent License in the appropriate section. If you are claiming exemption from providing Worker's Compensation Insurance for your employees, please contact the Workers' Compensation Office at 410-864-5100 or visit their website at [www.wcc.state.md.us](http://www.wcc.state.md.us) to obtain information and the appropriate forms for businesses who do not provide this type of coverage.
- **Use and occupancy permit** — Is required by applicants using a trailer as an office.

For more information, please call: **410-768-7000** (to speak with a customer service representative).  
TTY for the hearing impaired: **1-800-492-4575**. Visit our website at: **[www.MVA.Maryland.gov](http://www.MVA.Maryland.gov)**

Mail your completed application packet to:

MVA, BL&CS, Room 146  
6601 Ritchie Highway  
Glen Burnie, MD 21062

**Application for Title Service Agent License - 2 Year License**

<p><b>Type of Application</b></p> <input type="checkbox"/> Original Application <input type="checkbox"/> Renewal Application <input type="checkbox"/> Additional Location <input type="checkbox"/> Change of Address <input type="checkbox"/> Change of Name <input type="checkbox"/> Change of Officers	<p><b>Type of Ownership</b></p> <input type="checkbox"/> Individual Owner <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Close Corporation <input type="checkbox"/> LLC <input type="checkbox"/> Change of Ownership	<p>Title Service Agent # _____          Expiration Date _____          How is work obtained?  <input type="checkbox"/> Public _____  <input type="checkbox"/> Dealer _____  <input type="checkbox"/> Other _____</p>
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Company Name (include trade name) \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ County \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Business Phone \_\_\_\_\_ Business Hours \_\_\_\_\_

Employee ID Number (FEIN) \_\_\_\_\_ Current Trader's License Number \_\_\_\_\_

Email Address \_\_\_\_\_

Primary Contact (This information will be used for all MVA Business Licensing related matters)

Name \_\_\_\_\_ Phone Number \_\_\_\_\_ Email Address \_\_\_\_\_

Name of Owner, Partner or Officer	Social Security Number	Position	Home Phone Number
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Street Address (Home)	City	State	Zip Code
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Date of Birth	Driver's License Number	State
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Name of Owner, Partner or Officer	Social Security Number	Position	Home Phone Number
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Street Address (Home)	City	State	Zip Code
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Date of Birth	Driver's License Number	State
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Name of Owner, Partner or Officer	Social Security Number	Position	Home Phone Number
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Street Address (Home)	City	State	Zip Code
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Date of Birth	Driver's License Number	State
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First, Middle, and Last Name	Social Security Number
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Street Address (Home)	City	State	Zip Code
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First, Middle, and Last Name	Social Security Number
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First, Middle, and Last Name	Social Security Number
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YES NO

1. Have you ever been licensed as a vehicle dealer, salesman, or a title service agent in Maryland or any other state?  
 If yes, Person licensed \_\_\_\_\_  
 Name of Business \_\_\_\_\_ Type of License \_\_\_\_\_  
 License number \_\_\_\_\_ State \_\_\_\_\_ Expiration \_\_\_\_\_

Submit additional information on separate sheet.

2. Are any administrative actions, including suspension, revocation, refusal or fines pending against any license you have ever held? NOTE: This does not include your personal driver's license.  
 If yes, Business \_\_\_\_\_ Licensee \_\_\_\_\_  
 Type of license \_\_\_\_\_ License number \_\_\_\_\_  
 State \_\_\_\_\_ Expiration \_\_\_\_\_ Date of action \_\_\_\_\_

Explanation (submit additional sheets if needed)

3. Has any business license you have held in Maryland or any other state been suspended, revoked, or refused? NOTE: This does not include your personal driver's license.  
 If yes, Business \_\_\_\_\_ Licensee \_\_\_\_\_  
 Type of license \_\_\_\_\_ License number \_\_\_\_\_  
 State \_\_\_\_\_ Expiration \_\_\_\_\_ Date of action \_\_\_\_\_

Submit additional information on separate sheet.

4. Have any of the owners, management personnel, or any other person, who shall have a financial interest, either direct or indirect in the business, ever been convicted of a crime other than a traffic violation? If yes, please give details in a separate statement as to dates, nature of conviction, court and the final disposition.

5. Do you currently have Title Service Representatives? If yes, please complete form (CS-018) for each representative. **Each Title Service Personnel must present a MVA issued Title Service Agent or Representative Card.**

6. Are you currently employed with a Maryland State Government Agency? If yes, what Agency? \_\_\_\_\_

### INSURANCE INFORMATION

7. Surety Bond Insurance Company \_\_\_\_\_ Policy/Binder # \_\_\_\_\_ Agent \_\_\_\_\_

8. Do you provide Worker's Compensation? If no, attach a copy of your exemption certification.

Insurance Company \_\_\_\_\_ Policy/Binder # \_\_\_\_\_ Agent \_\_\_\_\_

### CERTIFICATION

**Any willful misinformation provided with fraudulent intent may be prosecuted under Maryland Law. I solemnly affirm under penalties of perjury and upon personal knowledge the contents of the foregoing document is true and correct. This title service meets the location requirements and I/we understand the titling and registration, insurance, inspection, and title service licensing provisions set forth in Maryland Vehicle Law and pertinent Motor Vehicle Administration regulations.**

Name of Title Service \_\_\_\_\_

\_\_\_\_\_ by \_\_\_\_\_  
 Date Applicant Signature Capacity Printed Name

\_\_\_\_\_ by \_\_\_\_\_  
 Date Applicant Signature Capacity Printed Name

\_\_\_\_\_ by \_\_\_\_\_  
 Date Applicant Signature Capacity Printed Name

(All owners and corporate officers are required to sign.)

For MVA Use Only

Date \_\_\_\_\_  CV  CK  C

Site Inspection \_\_\_ Pass \_\_\_ Fail Investigator Printed Name \_\_\_\_\_ Date \_\_\_\_\_

Application \_\_\_ Accepted \_\_\_ Rejected (see Attached) Representative Name \_\_\_\_\_ Date \_\_\_\_\_



Apply to register to vote with your driver's license transaction. For details ask your customer service representative.

**Zoning Approval Form**

To be completed by applicant and presented for approval to the local zoning authorities

**Submit with Application**

Company name (including trade names)

Business Address - Location to be Licensed

City County State Zip Code

Name and type of storage location

Street Address City or County State Zip Code

Name and type of any additional storage locations

Street Address City of County State Zip Code

**Type of Business (check appropriate blocks)**

**Licenses**

- Wholesale
- New Vehicle
- Used Vehicle
- Trailer
- Motorcycle
- ADR # of Acres \_\_\_\_\_
- Scrap Processr # of Acres \_\_\_\_\_
- Title Service
- Emergency Vehicle
- Manufacturer
- Distributor

**Transporters**

- Inspection Station
- Vehicle Painting/Remodeling/Repair
- Auctioneer
- New Vehicles for Manufacturer
- Other \_\_\_\_\_

**This section to be completed by zoning official** to verify applicant has met all local zoning requirements to conduct the type of business specified above.

I certify, that the business of \_\_\_\_\_  
does \_\_\_\_\_ does not \_\_\_\_\_ meet all zoning requirements, including the issuance of a use and occupancy permit, if required.

Signed Printed Name

Official Capacity

Telephone # Email Address

Date

**BUSINESS LICENSING ORIENTATION REQUEST**

**Note:** Applicants for a dealer or title service license must attend a Business Licensing Orientation Class.  
The class is scheduled monthly at 9:00 a.m. at the Glen Burnie MVA.

Complete this form and return by fax to: **410-768-7602**.  
Or email completed form to: [mvablcsd@mva.maryland.gov](mailto:mvablcsd@mva.maryland.gov)

Or mail your request to: **Motor Vehicle Administration  
6601 Ritchie Highway, N. E.  
Room 146  
Glen Burnie, MD 21062**

The orientation will give information that is essential in the daily operation of your dealership and will allow time for any questions you may have. Representatives from Business Licensing and Consumer Services and Investigative Services will give presentations.

Questions are welcomed and encouraged.

**Please provide the following information:**

Participant Name: \_\_\_\_\_

Participant Address: \_\_\_\_\_

Participant Phone Number: \_\_\_\_\_

Participant Email Address: \_\_\_\_\_

Type of License: \_\_\_\_\_

Name of Attendees/Job Title: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Name of attendees/job title: \_\_\_\_\_

\_\_\_\_\_

The Administration strongly encourages participation by owners, title clerks and any staff who may be involved in the day to day operation of your business.

A business license may not be issued until you attend the orientation.

Licensee Signature: \_\_\_\_\_ Date: \_\_\_\_\_

You will be scheduled for the next available class. A confirmation notice will be sent to you at the e-mail address indicated above. If you have any questions please e-mail the Motor Vehicle Administration Business Licensing Division at [mvablcsd@mdot.state.md.us](mailto:mvablcsd@mdot.state.md.us). Please call if you are unable to attend. Anyone 15 minutes late or more for orientation will be required to reschedule.

**MVA Criminal Record Request Form**

Please place your photo driver's license below and photocopy.

By my signature, I authorize the Motor Vehicle Administration to perform a criminal background check.

Signature

Date

Name of Business

Type of License:  Dealer  Salesman  Professional Driver Instructor  Title Service Agent  Other

**Instructions for Criminal Background Request**

This form is to be used for the processing of your Maryland criminal background check. At the present time no fee will be charged for this service.

**Maryland Residents:**

This form must accompany all applications from licensees or anyone with a financial interest in a business.

- Photocopy a clear legible copy of either your Maryland Photo Driver's License or a Maryland Photo ID card on the front of this form.
- If you have a change of address that does not appear on your license or your ID, please note it on the form.
- Sign the photocopy.
- The photocopy which contains your original signature must be submitted with your application to the Motor Vehicle Administration.

**Out of State Residence:**

- Applicants will be required to request Criminal Justice Information System background checks from the appropriate Law Enforcement Agency in their state of residence.
- The background checks should not be sent directly from the appropriate Law Enforcement Agency to the Motor Vehicle Administration.
- For identification purposes you must submit a clear legible copy of your out-of-state driver's license or a Photo ID on this form.

**MVA Use Only:**

**Surety Bond of Title Service Agent**

Bond Number \_\_\_\_\_ Agent's Number \_\_\_\_\_ Effective Date \_\_\_\_\_

Know all persons by these presents:

Company/Corporate Name \_\_\_\_\_

Trade Name, if any \_\_\_\_\_

Officer(s) Name(s) \_\_\_\_\_

as Principal, and \_\_\_\_\_  
(name and address of bonding company)

a corporation organized and existing under the laws of the State of \_\_\_\_\_ and authorized to do business in the State of Maryland, as Surety, are held and firmly bound unto the Administrator of Motor Vehicles, State of Maryland in the penalty sum of fifty thousand dollars (\$50,000) lawful money of the United States of America, for the payment of which, well and truly to be made, we and each of us, bind ourselves, our heirs, executors, administrators, successors, and assigns, jointly and severally, firmly by these presents.

**Signed, Sealed, and Dated this \_\_\_\_\_ day of \_\_\_\_\_ (year) \_\_\_\_\_**

The condition of this obligation is such that, whereas, the above bounden Principal has or is about to make application to the Administrator of Motor Vehicles for the State of Maryland to engage in the business of transporting to and from the Administration, Motor Vehicle certificates of Title, Registrations, Driver's Licenses, Certified Copies of Records, and other related documents, and in accordance with the Transportation Article of the Annotated Code of Maryland and Regulations promulgated by the Administrator of Motor Vehicles, is required to furnish a Surety Bond.

Now, therefore, if the above bounden Principal shall conduct the business in full compliance with those Sections of the Transportation Article, of the Annotated Code of Maryland, as set forth in the Regulations of the Administrator of Motor Vehicles for the State of Maryland, then this obligation shall be null and void; otherwise to remain in full force and effect. This bond shall be for the use and benefit of the Administrator of Motor Vehicles of the State of Maryland and for any person who may suffer loss by reason of any violation of the above mentioned laws.

This bond shall run concurrently with the period of the license granted to the Principal, and shall remain in full force and effect for any renewal thereof, provided, however, that the penalty of the bond may not be cumulative from year to year, and the total liability of the Surety herein, may not exceed the sum of fifty thousand dollars (\$50,000) regardless of the number of license periods for which the bond is in force.

The Surety may cancel this bond at any time by giving **forty five (45) days** written notice by registered or certified mail to the Administrator of Motor Vehicles, State of Maryland, however, remaining liable for any defaults under this bond, committed prior to the expiration of such forty five (45) day period.

**Seal  
of  
Surety**

\_\_\_\_\_  
Signature of President/Owner/Partner

\_\_\_\_\_  
Signature of Vice President/Partner

\_\_\_\_\_  
Signature of Treasurer/Secretary/Partner

\_\_\_\_\_  
Signature of Principal (one of the above)

By \_\_\_\_\_

\_\_\_\_\_  
Surety

By \_\_\_\_\_



**IMPORTANT MESSAGE**

**PLEASE READ THIS IMPORTANT MESSAGE**

The Motor Vehicle Administration (MVA) must receive verification from the Comptroller of Maryland that an applicant for renewal of a Vehicle Dealer, Automotive Dismantler & Recycler, Scrap Processor, Title Service, Manufacturer, Distributor, Factory Branch or Vehicle Salesman license has paid, or satisfactorily arranged for payment of state taxes before the license can be renewed. If an arrangement for payment has been established you will need a letter of clearance from the Comptroller's Office.

Approximately 90 days prior to your license becoming due for renewal, the MVA will submit your name to the Comptroller's Office. The Comptroller's Office will notify the MVA of those applicants having a problem. The MVA will send a letter informing you if there is a problem. Your license will not be renewed without a clearance from the Comptroller's Office. Please share this information with your salespersons.

If you have questions or need assistance, please call the appropriate phone number listed below to speak with a representative of the Comptroller of Maryland.

**(MVA cannot assist with the tax matters)**

<b>Personal Income Tax</b>	<b>410-974-2432</b>
<b>Business Tax</b>	<b>410-767-1908</b>
<b>Unemployment Insurance Contributions</b>	<b>410-767-2699</b>
<b>Multiple Tax Liabilities</b>	<b>410-767-1908</b>

This notice is sent to alert you that you may need to contact the Comptroller of Maryland and your prompt attention to this notice may help to reduce the potential of your renewal being delayed.

**Note:** These actions were implemented under the Budget Reconciliation Act of 2003 – Chapter 203, Laws of 2003.

## Site Inspection Check List

To All Persons Applying For A Site Inspection:

Please do not call for your appointment until you have met the Office and Location Requirements as outlined in your packet under COMAR 11.12.01.02 – 11.12.01.04. **The licensee MUST be present for the inspection – no exceptions.**

### Office Requirements:

- 1. Desk
- 2. Chair
- 3. Locking File Cabinet
- 4. Telephone \* (preferably a landline)
- 5. Sign (required for Retail, Tag & Title, may NOT use MVA logo or state seal)\*
- 6. Lighting
- 7. Heat
- 8. Electricity (**NO** generator, must be hard-wired)

\*A stipulation form may be used, providing you with a specific period of time to comply with these requirements, based on the other approval by the Business Licensing Division of your application packet. If your office is in a commercial building, make sure it is clearly marked with the office / suite number.

A home wholesale office must be located in your personal domicile (where you live - the address on your drivers' license) and must be accessible without going through, past, or near any sleeping quarters or other general living areas. See COMAR 11.12.01.02 and addendum.

### Retail Sales Requirements: (See COMAR sections included in packet)

- 1. Location must be fully visible from an approved street or highway that is accessible to the public.
- 2. Location shall be of size to adequately and safely permit the display of a minimum of ten (10) vehicles AND space for customer parking.
- 3. Location must be fully lighted
- 4. Display and parking area shall be adequately surfaced (i.e. paved, crushed stone, etc. NOT dirt or grass)
- 5. The retail sale of vehicles must be the only or principal business conducted from the location (see Maryland Vehicle Law 15.304(A)(i) ).
- 6. Exterior signs must be in place (See COMAR 11.12.01.02 N.) See stipulation as explained under office requirements.
- 7. Repair Facility or Contract (CS-125) – If you do not have repair facilities at the location, you must provide a contract with a repair facility within 5 miles of your dealership. The contract must include Maryland State Police (MSP) inspection if applicable.

# **Title 11 DEPARTMENT OF TRANSPORTATION**

## **Subtitle 12 MOTOR VEHICLE ADMINISTRATION — LICENSING OF BUSINESSES AND OCCUPATIONS**

### **Chapter 02 Title Service Agents**

**Authority: Transportation Article, §§12-104(b), 15-102, 15-103, 15-105, 15-106, 15-108, and 15-604—15-606, Annotated Code of Maryland**

#### **.01 Definitions.**

A. In this chapter, the following terms have the meanings indicated.

B. Terms Defined.

(1) "Administration" means the Motor Vehicle Administration.

(2) "License" means a title service agent's license issued by the Administration under Transportation Article, Title 15, Subtitle 6, Annotated Code of Maryland.

(3) "Location" means the fixed location from which the title service agent conducts the activity of a title service agent and which is specified in the application for the license.

(4) "Representative" means an employee of the business who acts on behalf of the licensee.

(5) "Title service agent" has the meaning stated in Transportation Article, §15-601(c), Annotated Code of Maryland.

#### **.02 Licensing of Title Service Agents.**

A. An individual may not conduct the business of a title service agent unless the individual meets the requirements set forth in this chapter and is licensed.

B. A license may be obtained by submitting to the Administration in the form required by the Administration:

(1) An application;

(2) Zoning approval, as set forth in Regulation .03B of this chapter;

(3) A surety bond as set forth in Regulation .07 of this chapter; and

(4) The fee as set forth in COMAR 11.11.05.

C. The Administration may renew licenses every 2 years.

D. A licensed title service agent shall notify the Administration immediately of any change in the information submitted in the original application or a renewal application.

### **.03 Office Requirements.**

A. Before issuing a license, the Administration shall inspect and approve a title service agent's office.

B. Zoning of a Title Service Agent's Office.

(1) The office shall be located in an appropriately zoned location.

(2) An applicant for a license shall provide verification of zoning approval, if required by the local jurisdiction, in the form of a zoning certification.

(3) A title service agent who does not conduct business with the public at the licensed location may be exempt from local zoning requirements.

C. A title service agent's office shall contain, at a minimum, a:

(1) Desk;

(2) Chair;

(3) File cabinet; and

(4) Telephone used specifically for title service business.

D. Signs. A title service agent's office shall have, unless prohibited by local ordinances, a sign which shall:

(1) Be legible from the street or highway; and

(2) Clearly indicate the type of business conducted at the office.

E. The license shall be displayed in the office.