



### Part 592.6(l) Notification of Business Change

NHTSA Form 1483

Use this form to submit the RI's Notification of Business Change to notify NHTSA of relevant changes to the RI business that occurred after the last Yearly Statement was submitted or after the initial application for registration as an importer.

#### Section I. Registered Importer Information

Applicant Name: \_\_\_\_\_  
Last First Middle

Date of Birth: \_\_\_\_\_ Position: \_\_\_\_\_

Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Country: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Form of Business Organization: \_\_\_\_\_

State under which business formed: \_\_\_\_\_

#### Section II. Identify Each Partner/ Officer/ Director/ Manager of RI's Partnership or Corporation §592.5(a)

Name \_\_\_\_\_  
Last First Middle Date of Birth

Position \_\_\_\_\_ Owned \_\_\_\_\_% Business Address \_\_\_\_\_  
Street, Suite No.

City \_\_\_\_\_ State/Province \_\_\_\_\_

Country: \_\_\_\_\_ Zip Code \_\_\_\_\_

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Name \_\_\_\_\_  
\_\_\_\_\_ Last \_\_\_\_\_ First \_\_\_\_\_ Middle \_\_\_\_\_ Date of Birth \_\_\_\_\_

Position \_\_\_\_\_ Owned \_\_\_\_\_% Business Address \_\_\_\_\_  
Street, Suite No.

City \_\_\_\_\_ State/Province \_\_\_\_\_

Country: \_\_\_\_\_ Zip Code \_\_\_\_\_

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Name \_\_\_\_\_  
 \_\_\_\_\_  
 Last First Middle Date of Birth

Position \_\_\_\_\_ Owned \_\_\_\_\_% Business Address \_\_\_\_\_  
 \_\_\_\_\_ Street, Suite No.

City \_\_\_\_\_ State/Province \_\_\_\_\_

Country: \_\_\_\_\_ Zip Code \_\_\_\_\_

(Attach a separate page if there are more than 3 partners/officers/directors/managers)

**Section III. Business Interests**

I am willing to contract with individual owners to conform to the safety and bumper standards the following types of vehicles those owners import, provided the vehicles have been determined to be eligible for importation pursuant to 49 CFR Part 593 (check all that apply):

<input type="checkbox"/> Passenger Cars	<input type="checkbox"/> MPVs	<input type="checkbox"/> Light Duty Trucks (10,000 lb GVWR or less)	<input type="checkbox"/> Trailers	<input type="checkbox"/> Buses
<input type="checkbox"/> Heavy Trucks & Tractors (Over 10,000 lb GVWR)		<input type="checkbox"/> Motorcycles / Motor Driven Cycles	<input type="checkbox"/> Low-speed Vehicles	

I am willing to modify vehicles imported from:  Canada  All Other Countries

**Section IV. Petition for an Import Eligibility Decision**

Yes  No I am willing to prepare and submit import eligibility petitions to NHTSA and to pay all required fees for those petitions, as set forth in 49 CFR Parts 593 and 594

**Section V. Registered Importer Premises**

Main Office

Business Address \_\_\_\_\_ City

State \_\_\_\_\_ Country \_\_\_\_\_ Zip Code \_\_\_\_\_

Telephone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

Date Facility First Used \_\_\_\_\_

Date Facility Closed \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

**Records Storage**

Same as Main Office

**Business Address**

\_\_\_\_\_ **City**

\_\_\_\_\_

**State**

\_\_\_\_\_ **Country** \_\_\_\_\_ **Zip Code**

\_\_\_\_\_

Telephone Number \_\_\_\_\_ Fax Number \_\_\_\_\_  
\_\_\_\_\_

Date Facility First Used \_\_\_\_\_ Date Facility Closed \_\_\_\_\_  
\_\_\_\_\_

**Conformance Modifications**

Same as Main Office

Business Address \_\_\_\_\_ City \_\_\_\_\_  
\_\_\_\_\_

State \_\_\_\_\_ Country \_\_\_\_\_ Zip Code \_\_\_\_\_  
\_\_\_\_\_

Telephone Number \_\_\_\_\_ Fax Number \_\_\_\_\_  
\_\_\_\_\_

Date Facility First Used \_\_\_\_\_ Date Facility Closed \_\_\_\_\_  
\_\_\_\_\_

**Vehicle Storage**

Same as Main Office

Business Address \_\_\_\_\_ City \_\_\_\_\_  
\_\_\_\_\_

State \_\_\_\_\_ Country \_\_\_\_\_ Zip Code \_\_\_\_\_  
\_\_\_\_\_

Telephone Number \_\_\_\_\_ Fax Number \_\_\_\_\_  
\_\_\_\_\_

Date Facility First Used \_\_\_\_\_ Date Facility Closed \_\_\_\_\_  
\_\_\_\_\_

**Section VI. Principals of the Applicant whom the Applicant Authorizes to submit Conformity Certifications to NHTSA**

Principal Name (Last, First and Middle)

Title

\_\_\_\_\_  
\_\_\_\_\_

Principal Name (Last, First and Middle)

\_\_\_\_\_  
\_\_\_\_\_ Title

Principal Name (Last, First and Middle)

\_\_\_\_\_  
\_\_\_\_\_ Title

Principal Name (Last, First and Middle)

\_\_\_\_\_  
\_\_\_\_\_ Title

\* Principal, with respect to a Registered Importer, means any officer of a corporation, a general partner of a partnership, or the sole proprietor of a sole proprietorship. The term includes a director of an incorporated Registered Importer, and any person whose ownership interest in a Registered Importer is 10% or more.

**Section VII. List of Employees**  
**(Attach a separate page if there are more than 4 employees)**

Principal Name (Last, First and Middle)

\_\_\_\_\_  
\_\_\_\_\_ Title

Principal Name (Last, First and Middle)

\_\_\_\_\_  
\_\_\_\_\_ Title

Principal Name (Last, First and Middle) \_\_\_\_\_ Title \_\_\_\_\_

Principal Name (Last, First and Middle) \_\_\_\_\_ Title \_\_\_\_\_

\*Example: Office Staff - reception, accounting, data entry, mechanic.

\*\*The professional qualifications requirement for the mechanic must be of the applicant or its employees.

**Section VIII. Customs Broker**

Broker Business Name \_\_\_\_\_

Business Address \_\_\_\_\_ City \_\_\_\_\_

State/Province \_\_\_\_\_ Country \_\_\_\_\_ Zip Code \_\_\_\_\_

Filer Code

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(Custom Broker Filer Code)

Contact Info \_\_\_\_\_

Last

First

Telephone Number \_\_\_\_\_  
\_\_\_\_\_

Fax Number \_\_\_\_\_

**Section IX. Surety that Issues DOT Conformance**

Surety Business Name \_\_\_\_\_

Business Address \_\_\_\_\_ City \_\_\_\_\_

State/Province \_\_\_\_\_ Country \_\_\_\_\_ Zip Code \_\_\_\_\_

Surety Code

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(CBP Assigned Surety Code)

Contact Info \_\_\_\_\_

Last

First

Telephone Number \_\_\_\_\_ Fax Number \_\_\_\_\_  
\_\_\_\_\_

**Section X. Mandatory Service Insurance Policy Provider**

**Business Name** \_\_\_\_\_

**Business Address** \_\_\_\_\_ **City** \_\_\_\_\_  
\_\_\_\_\_

**State/Province** \_\_\_\_\_ **Country:** \_\_\_\_\_ **Zip Code** \_\_\_\_\_

**Contact Info** \_\_\_\_\_  
\_\_\_\_\_

**Last** \_\_\_\_\_ **First** \_\_\_\_\_

**Telephone Number** \_\_\_\_\_ **Fax Number** \_\_\_\_\_



**Section XI. Associated with EPA Licensed Independent Commercial Importer  
(ICI) for Importing Non-Canadian Certified Vehicles**

ICI Name \_\_\_\_\_

Business Address \_\_\_\_\_ City \_\_\_\_\_  
\_\_\_\_\_

State \_\_\_\_\_ Country \_\_\_\_\_ Zip Code \_\_\_\_\_

Contact Info \_\_\_\_\_  
\_\_\_\_\_  
Last First

Telephone Number \_\_\_\_\_ Fax Number \_\_\_\_\_  
\_\_\_\_\_

**Section XII. Certification, Acknowledgement & Disclosure**  
*(Must complete this section)*

(§ 592.5(f)(2)(ii)) By checking this box, I hereby certify that I have read and understand the duties of a Registered Importer, as set forth in 49 CFR 592.6 and that

(§ 592.5(f)(2)(ii)) By checking this box, I hereby certify that all the information provided in each of my previous annual statements or changed in any notification

(§ 592.5(f)(2)(ii)) By checking this box, I hereby certify that I understand that, in the event that the registration is suspended or revoked, or lapses, I will remain

(§ 592.5(e)(l)(iii)) By checking this box, I acknowledge that the registered importer, or any person associated with direct or indirect ownership or control of the

**Section XIII. Documentation Preparation & Enclosures**

**(§ 592.5(a)(3)) Identity of Person preparing this statement (if different from RI.)**

Name \_\_\_\_\_ Title \_\_\_\_\_

**Business Address**

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**City**

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**State/Province**

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**Country**

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**Zip Code**

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I have attached to this statement \_\_\_\_\_ enclosures identified by the form entitled "Notification of Business Change Checklist" as set forth in 49 CFR § 592.5(f).

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

(Signature must be acknowledged by a notary (§ 592.5(A)(12))

Notary's Signature \_\_\_\_\_ Date \_\_\_\_\_

**Please complete the form by typing or clearly printing.**  
Questions about the form may be answered by sending an e-mail to or by calling  
202-366-4192.  
**Mail the completed form with an original signature to:**

**Attn: Business Change Notification**  
**Director, Office of Vehicle Safety Compliance 1200 New Jersey Avenue, S.E.**  
**West Building, Room W45-205, Mail Code NVS-223 Washington, DC 20590**

**Additional Information**

Note: Each RI that is granted its RI registration must keep its business information on file with NHTSA current, accurate and complete by submitting revised information generally not later than 30 calendar days after the relevant business changes occur. If a RI intends to change its street

**Section IXV. Notification of Business Change Checklist**

√	N/A	No.	Enclosures with the following material or information should accompany the Notification of Business Change
<input type="checkbox"/>		1	A narrated digital DVD video that shows the facilities the applicant proposes to use to conduct its business as an RI. This must be formatted to play in Windows Media Player® or in QuickTime®. Suitable video formats include MPEG® and AVI. The recording must include footage of the office space and office equipment the applicant will use in its RI business, including file cabinets or other devices that will be used to store the records an RI must maintain. The recording must also show the area outside the building as having secure vehicle storage space and the premises inside the building that will be used for performing conformance modifications on imported nonconforming vehicles. (§ 592.5(a)(9)(ii))
<input type="checkbox"/>		2	If the applicant is a non-public corporation, the applicant must provide a statement issued by the Office of the Secretary of State, or other responsible official of the State in which the applicant is incorporated, certifying that the applicant is a corporation in good standing. The application also must include the full name, street address, and date of birth of each officer, director, manager, and person who is authorized to sign documents on behalf of the corporation and the name of any person who owns or controls 10% or more of the corporation. (§ 592.5(a)(4)(iii))
<input type="checkbox"/>		3	If the applicant is a public corporation, the applicant must include a copy of its latest 10 -K filing with the Securities and Exchange Commission, and provide the name and address of any person who is authorized to sign documents on behalf of the corporation. (§ 592.5(a)(4)(iv))
<input type="checkbox"/>		4	If the applicant is a corporation <u>not</u> organized under the laws of a State of the United States, or is a sole proprietorship or partnership located <u>outside</u> the United States, the application must be accompanied by the applicant's designation of a permanent resident of the U.S. as the applicant's agent for service of process in the form specified by 49 CFR § 551.45. (§ 592.5(a)(5)(v))
<input type="checkbox"/>		5	A copy of the Safety Recall Service Contract the applicant has entered with an independent insurance company, with notarized signatures, to cover the obligations the applicant will incur as an RI with respect to conducting safety recall campaigns. (§ 592.5(a)(8))
<input type="checkbox"/>		6	A copy of the current business license issued to the applicant to do business as an importer or modifier or seller of motor vehicles or a statement that the applicant has made a bona fide inquiry and is not required by State or local authority to have such a license or document. (§ 592.5(a)(5)(iii))
<input type="checkbox"/>		7	Information sufficient to establish that the applicant is technically able to modify any nonconforming motor vehicle to all applicable Federal motor vehicle safety and bumper standards. This information should include, but not be limited to, the professional qualifications of the applicant and its employees at the time of the application (such as whether any such persons have been licensed as mechanics), and a description of their experience in conforming and repairing vehicles. (§ 592.5(a)(9)(i))
<input type="checkbox"/>		8	Information sufficient to establish that the applicant is able to acquire and maintain information regarding the vehicles that it imports and the names and addresses of the owners of the vehicles that it imports or for which it furnishes certificates of conformity to NHTSA in order to notify such owners when a noncompliance or a defect related to motor vehicle safety has been determined to exist in such vehicles. (§ 592.5(a)(9)(iv))

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