MAINTENANCE OF RI REGISTRATION

This is your reminder that it is time to submit the information required to permit you to continue to be a registered importer (RI) for the fiscal year (FY) 2017, which begins on October 1, 2016. The information specified below should be submitted as soon as possible, but no later than September 30, 2016 for your company to remain in active status as an RI. Failure to submit the renewal information by that date will cause your registration to be automatically suspended effective October 10, 2016, as provided in 49 CFR 592.7(a)(1). Because there are delays in our receipt of material sent by regular mail, we recommend that you send this information by an overnight express carrier to:

Office of Vehicle Safety Compliance
National Highway Traffic Safety Administration
1200 New Jersey Avenue, S.E.
West Building-4th Floor-NEF-230 W45-205
Washington, DC 20590
Attn: RI Renewal

PLEASE COMPLETE AND SIGN THE ATTACHED FORM TO RENEW YOUR REGISTRATION

Also don’t forget to include with the completed registration renewal form, a new service insurance policy (with notarized signatures). Do not include a credit card authorization (Attachment 2) or a check made payable to the Treasurer of the United States with the renewal form. We will advise you of the renewal fee at a later date.

If there are any changes in the business information you have previously filed with NHTSA, please also submit the appropriate enclosure, as listed on page 5 of the registration renewal form, document that change.

RI renewal questions should be directed to Johnny Gibson at 202-366-1672
Part 592.5(f) & 592.6(l) Yearly Statement of Registered Importer or Notification of Business Change

Use this form to submit the RI's Yearly Statement or 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

<table>
<thead>
<tr>
<th>RI Name</th>
<th>Last</th>
<th>First</th>
<th>Date of Birth</th>
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<table>
<thead>
<tr>
<th>Position</th>
<th>Business Name</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Business Address</th>
<th>Street, Suite No.</th>
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</thead>
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<table>
<thead>
<tr>
<th>City</th>
<th>State/Province</th>
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<table>
<thead>
<tr>
<th>Country</th>
<th>Telephone Number</th>
</tr>
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<table>
<thead>
<tr>
<th>Zip Code</th>
<th>Fax Number</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>E-mail Address</th>
<th>Form of Business Organization</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>State under which business formed</th>
</tr>
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</table>

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

<table>
<thead>
<tr>
<th>Name</th>
<th>Last</th>
<th>First</th>
<th>Date of Birth</th>
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</table>

<table>
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<th>Country</th>
<th>Zip Code</th>
</tr>
</thead>
</table>
Name

Last

First

Date of Birth

Position

Business Address

Street, Suite No.

City

State/Province

Country

Zip Code

(Attach a separate page if needed)

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):

- [] Passenger Cars
- [] MPVs
- [] Light Duty Trucks (10,000 lb GVWR or less)
- [] Trailers
- [] Buses
- [] Heavy Trucks & Tractors (Over 10,000 lb GVWR)
- [] Motorcycles / Motor Driven Cycles
- [] 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

(Complete only if business changes occurred)

Main Office

Business Address

City

State

Country

Zip Code

Telephone Number

Fax Number

Date Facility First Used

Records Storage

- [] Same as Main Office

Business Address

City

State

Country

Zip Code

Page 2 of 5
Section VI. Principals of the Applicant whom the Applicant Authorizes to submit Conformity Certifications to NHTSA
(Complete only if business changes occurred)

Principal Name __________________________ Title ___________________
Principal Name __________________________ Title ___________________
Principal Name __________________________ Title ___________________
Principal Name __________________________ Title ___________________

Section VII. Customs Broker
(Complete only if business changes occurred)

Broker Name _____________________________
Business Address __________________________ City ____________________
State/Province ____________________________ Country __________________
Zip Code __________________ Contact Info ___________________________
Last ___________________________ First ___________________________
Section VIII. Associated with EPA Licensed Independent Commercial Importer (ICI)

(Complete only if business changes occurred)

ICI Name

Business Address

State

Country

Zip Code

Contact Info

Last

First

Telephone Number

Fax Number

Section IX. Certification, Acknowledgement & Disclosure

(Must complete this section)

☐ ($592.5(l)(2)(i)) 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 I will fully comply with each such duty.

☐ ($592.5(l)(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 that I may have provided to NHTSA in compliance with §592.6(i), remains correct and that all the information provided in this annual statement is true and correct.

☐ ($592.5(l)(2)(iii)) 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 obligated to notify owners and to remedy noncompliances or safety related defects, as required by 49 CFR 592.6(j), for each vehicle for which I have furnished a certificate of conformity to NHTSA.

☐ ($592.5(a)(3)) By checking this box, I acknowledge that the registered importer, or any person associated with direct or indirect ownership or control of the registered importer's business, or any person employed by or associated with the registered importer, has not been convicted of a crime related to the importation, purchase, or sale of motor vehicles or motor vehicle equipment. These offenses include, but are not limited to, title fraud, odometer fraud, or the sale of stolen vehicles.

Section X. Documentation Preparation & Enclosures

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

Name

Title

Business Address

City

State/Province

Country

Zip Code
I have attached to this statement ☐ enclosures identified by the form entitled "RI Yearly Statement or Business Change Notification Checklist" as set forth in 49 CFR § 592.5.

RI’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 Importcertification@dot.gov or by calling 202-366-4192.
Mail the completed form with an original signature to:

Attn: Yearly Statement or 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 address or telephone number or discontinue use of a facility that was identified in its registration application, it must notify NHTSA not less than 10 days before such change or discontinuance of such use, and identify the facility, if any, that will be used instead.

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### Section XI. RI Application Checklist

<table>
<thead>
<tr>
<th>✓</th>
<th>N/A</th>
<th>No.</th>
<th>Enclosures with the following material or information should accompany the &quot;Yearly Statement of Registered Importer or Notification Business Change&quot;</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>1</td>
<td>Information sufficient to establish that the applicant owns or leases one or more facilities in the United States sufficient in nature and size to repair, conform, and store the vehicles for which it provides certification of conformance to NHTSA including a copy of the deed or lease for each such facility, video photographs of each such facility, and the street address and telephone number of each such facility. (§ 592.5(a)(5)(iii))</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2</td>
<td>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 spaces and the premises inside the building that will be used for performing conformance modifications on imported nonconforming vehicles. Footage must also be provided that shows that the applicant has procured a current copy of Title 49, Code of Federal Regulations, Parts 400 to 559. (§ 592.5(a)(5)(iii))</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3</td>
<td>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))</td>
</tr>
<tr>
<td></td>
<td></td>
<td>4</td>
<td>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))</td>
</tr>
<tr>
<td></td>
<td></td>
<td>5</td>
<td>A cashier check or certified check made payable to the Treasurer of the United States in the amount specified under 49 CFR Part 594 to cover the cost of the application. (§ 592.5(a)(4)(iv))</td>
</tr>
<tr>
<td></td>
<td></td>
<td>6</td>
<td>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)(4)(iii))</td>
</tr>
<tr>
<td></td>
<td></td>
<td>7</td>
<td>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))</td>
</tr>
</tbody>
</table>

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RI CREDIT CARD AUTHORIZATION FORM

This is an electronic form. Please use your TAB key to go to the next field. If you made a mistake and moved to the next field, press SHIFT-TAB together to go back.

Choose Card Type: □ Visa □ MasterCard □ American Express

□ Discover

Last 4 Digits of the Credit Card Account on file: ____________

Expiration Date (MM/YYYY): ____________

Company Name: __________________________
Card Holder

Name: __________________________
Address: __________________________

,  

Email Address: __________________________
Telephone

Number: __________________________

Notes: __________________________

__________________________
__________________________
__________________________

Fill out this form to use your credit card to pay your compliance package, petition, and /or RI renewal fees. Please notify NHTSA by e-mail when the expiration date changes, an authorized user is no longer authorized, the card is cancelled, stolen, or you change credit cards.

Signature: ____________________________ Date ____________________________

Please fax this completed form to 202-493-0073 or email it to importcertification@dot.gov. You must call 202-366-5291 to provide the full credit card number to complete your transaction. Do not include your full credit card number on this form.