

**Government of the District of Columbia**  
**DEPARTMENT OF CONSUMER AND REGULATORY AFFAIRS**



**Office of Zoning Administrator**

**AUTO DEALER QUESTIONNAIRE**

**As per 11 DCMR Section 3202.2(b)(3), please complete the following information regarding the Automobile Dealer use, whether existing or proposed, and whether partial or full occupancy. Please print legibly in ink or type and complete the following questions; add explanation if needed to clarify proposal. Please note that cross outs or the use of white out VOIDS this form:**

**Address:** \_\_\_\_\_

**Name of Business:** \_\_\_\_\_

**Applicant Name:** \_\_\_\_\_

**Print Name** **Date**

Supplemental Auto Dealer Questionnaire:

1. Do you have a basic business license? Yes \_\_\_\_\_ No \_\_\_\_\_
  
2. How many other dealers are authorized to sell autos on the same lot? \_\_\_\_\_
  
3. Have you submitted a fully dimensioned surveyor plat or site plan identifying the exact location of parking? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, does the plat identify each dealer's location on the lot? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes to #3, has the plat been stamped by an architect or engineer? Yes \_\_\_\_\_ No \_\_\_\_\_
  
4. What is the exact number of square feet the dealer will occupy on the lot? \_\_\_\_\_
  
5. On average, how many customers does the dealer expect to have each day? \_\_\_\_\_
  
6. On average, how many cars does the dealer expect to sell each month? \_\_\_\_\_
  
7. Do you have office space on the lot? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, is the office space shared? Yes \_\_\_\_\_ No \_\_\_\_\_  
If yes, with how many other dealers do you share office space? \_\_\_\_\_
  
8. Will the dealer also repair or restore cars on the same lot? Yes \_\_\_\_\_ No \_\_\_\_\_

