

# **APPORTIONED REGISTRATION APPLICATION - SCHEDULE A**

Check One: Merge Fleets ☐ Yes ☐ No	Identify Fleet Numbers to Merge:

For Department Use Only

Bureau of Motor Vehicles • Commercial Registration Section
P. O. Box 68286 • Harrisburg. PA 17106-8286

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Α	Applicant Information																					
	TIN/EIN Registrant Name  USDOT # Business Street Address								D.B.A.							Contact Name						
									Mailing Street Address							E-mail Address						
	Acct #		City	County	,	State Zip Code City		City County		,	State Zip Code			Registration Year Tele		elephon	elephone Number		Fax Number			
В	Weights																					
	PA			СО	СО СТ		DC		DE		-L	GA	GA			ID						
IL IN		IN		KS	KY	LA	MA		MD	ME		MI		MN	MO	MO			MT			
	NC ND NE		NE	NH	NJ			NV	NY		ОН		OK .	OR	)R			SC				
							NM															
	SD	TN TX UT VA		VT		WA	WI		WV		WY	AB	BC			МВ						
	NB	NF		NS	ON	PE	QC		SK													
С	Vehicle A	dditi	ons			'	Ċ			•												
	Title Number		Vehicle I		dentification Number		Equipment Numbe		er Year	N	Make		ody Type*	Axles	S	eats	Fuel**	Unladen Weight				
	Gross Vehicle Weigh		tht Gross Combination		n Weight	t Purchase Price		rchase Date	Factory	Price USDOT		Γ#	TIN/EIN UT Spec Tru		uck	CO Miles		PA Registration Plate Number				
																☐ YES						
	Vehicle Owner (Lessor/Lessee)							Will the designated carrier responsible for safety change during the year?														
														☐YES ☐NO								
	Title Number		V		Identification	Number	Equipment Num		er Year	N	Make		ody Type*	Axles Se		eats	Fuel**	Unladen Weight				
		Gross Vehicle Weight Gross Combination Weight Purchase Price																				
	Gross Vehicl			Purchase Date		Factory	Price	e USDOT#		TIN/EIN	UT Spec Tr	uck	ck CO Miles		PA Registration Plate Number							
												☐ YES ☐	NO  TYES									
		Vehicle Owner (Lessor/Lessee)								Will the designated carrier responsible for safety characteristics								ange during the year?				
						☐ YES ☐ NO																
D	NAIC#	IAIC# Insurance Company Name						duplicate cab					* BODY TYP	Έ		** FUEL						
				] = "	5 5 .			each vehicle ne fleet:				TR – Tractor TK – Truck (Single)			<ul> <li>D – Diesel</li> <li>G – Gas</li> <li>N – Natural Gas</li> <li>P – Propane</li> </ul>							
	Policy Number			Effective Date		Expiration Date								BS – Bus			H – Hybrid O – Oth					
E	I acknowledge the	cknowledge that I may lose my operating privilege or vehicle registration for failure to maintain financial responsibility on the currently registered vehicle(s) for the period of registration. My signature attests to knowledge of all applicable state deral motor carrier laws, regulations and that the vehicle(s) has/have a current valid safety inspection.										plicable state and										
	By	iei idWS, f	eguidiions	s anu mai me venio		e a current valid salety	mapect	ioil.		Title					Da	te						
	ByByTitleDate																					

## INSTRUCTIONS

Merge Fleets: If you have multiple fleets and wish to merge them into one fleet, check the appropriate box. Fleets may only be merged at renewal. Indicate the fleet numbers you wish to merge.

#### Section A

Enter the TIN/EIN, registrant name, contact name, USDOT number, business address and mailing address (If the mailing address is different than the business address. Post office box addresses may only be used in conjunction with a bonafide numbered street address and may not be used alone), e-mail address, account number, registration year, telephone number and fax number.

Under the Full Reciprocity Plan (FRP) effective January 1, 2015, there is no longer a need to segment vehicles by the jurisdiction in which they travel. If you have multiple fleets and wish to combine vehicles into one fleet, please check the appropriate boxes for merging accounts at the top of the page.

#### Section B

List the maximum vehicle weight at which you plan to operate for each jurisdiction.

### Section C

List the vehicle information where appropriate. Up to two vehicles may be listed in this section. If the vehicle is leased, the lessee USDOT and TIN/EIN numbers are required along with a copy of the lease. **NOTE:** If the vehicle has a current Pennsylvania registration, enter in the registration plate number. The registration plate must be submitted with the application to receive credit for the apportioned plate.

**NOTE:** For body type, use one of the following: tractor (TR), single truck (TK) or bus (BS). If a truck, list total number of axles on the truck including trailer axles if requesting combination weight. For tractor, list the number of axles on the tractor and the total number of axles for the tractor and trailer. Example: 3/5 means 3 axles for the tractor and 5 combined including the trailer. If the vehicle is a bus, list seating capacity. Do not leave any information blank.

**Utah Truck Indicator (UT Spec Truck):** If the truck type entering the state of Utah is a cement pump, well boring unit, or crane, the Utah Special Truck block should be checked as "Yes." If this does not apply, check "No."

Colorado Miles (CO Miles): If the vehicle fleet operates more than 10,000 miles nationally per year, the box must be checked "Yes."

**NOTE:** If the vehicle is leased to the applicant, you must identify the USDOT number and EIN/TIN of the motor carrier responsible for safety. Also, indicate if the motor carrier responsible for safety will change during the registration year.

#### Section D

List the insurance company's name, NAIC #, policy number, effective date and expiration date of the policy. Indicate how many duplicate cab cards are needed if applicable. List exempt commodities. **NOTE:** The insurance information listed can only be for full liability coverage.

An exempt for-hire motor carrier transports exempt (unregulated) property owned by others for compensation. The exempt commodities usually include unprocessed or unmanufactured goods, fruits and vegetables, and other items of little or no value. You can find the list of exempt commodities on the FMCSA website at http://www.fmcsa.dot.gov/registration/administrative-ruling-119.

#### Section E

Owner(s) or authorized representative(s) must sign, date and list their title with the company.

NOTE: Apportioned registration plates may be available as a personalized registration plate for vehicles with a registered gross weight up to 14,000 lbs. To check personalized registration plate availability, visit PennDOT's Driver and Vehicle Services website, www.dmv.pa.gov, and select the Personalized Registration Plate Availability link from the list of services under the Online Driver and Vehicle Services heading. Should you choose to personalize your apportioned registration plate, please complete this application and attach a completed Form MV-904C, "Application for Personalized Commercial Registration Plate." The fee to personalize your registration plate is an additional \$100, and the registration on your vehicle must be current in order for PennDOT to process your request. The additional \$100 fee covers the cost of your personalized registration plate order only and will not renew your vehicle's registration. Payment is to be made by a separate check or money order payable to the Commonwealth of Pennsylvania. PLEASE DO NOT SEND CASH. Personalized registration plates will not be reserved until PennDOT receives payment and a completed application, and approves your requested registration plate configuration [number(s)] and/or letter(s)]. Please note that registration plate requests are processed on a first-come, first-served basis. Although a requested registration plate configuration may show as being available on the website, it is possible that a request for the same registration plate configuration may have already been submitted by another customer and may not be available when making application.

In state: 1-800-932-4600 ◆ TDD: 1-800-228-0676 ◆ Out-of-State: 1-717-412-5300 ◆ TDD Out-of-State: 1-717-412-5380