

Motor Carrier Identification Report

(Application for USDOT Number)

REASON FOR FILING (Mark only one)

- NEW APPLICATION
 BIENNIAL UPDATE OR CHANGES
 OUT OF BUSINESS NOTIFICATION
 REAPPLICATION (AFTER REVOCATION OF NEW ENTRANT)

1. NAME OF MOTOR CARRIER			2. TRADE OR D.B.A. (DOING BUSINESS AS) NAME					
3. PRINCIPAL ADDRESS		4. CITY		5. STATE/PROVINCE		6. ZIP CODE+4	7. COLONIA (MEXICO ONLY)	
8. MAILING ADDRESS			9. CITY		10. STATE/PROVINCE		11. ZIP CODE+4	12. COLONIA (MEXICO ONLY)
13. PRINCIPAL BUSINESS PHONE NUMBER			14. PRINCIPAL CONTACT CELL PHONE NUMBER			15. PRINCIPAL BUSINESS FAX NUMBER		
16. USDOT NO.		17. MC OR MX NO.	18. DUN & BRADSTREET NO.		19. IRS/TAX ID NO.			
				EIN		SSN		
20. INTERNET E-MAIL ADDRESS					21. CARRIER MILEAGE (to nearest 10,000 miles for last calendar year) YEAR			

22. COMPANY OPERATION (Mark all that apply)

A. Interstate Carrier
 B. Intrastate Hazmat Carrier
 C. Intrastate Non-Hazmat Carrier
 D. Interstate Hazmat Shipper
 E. Intrastate Hazmat Shipper

23. OPERATION CLASSIFICATION (Mark all that apply)

A. Authorized For-Hire
 B. Exempt For-Hire
 C. Private Property
 D. Private Passengers (Business)
 E. Private Passengers (Non-Business)
 F. Migrant
 G. U. S. Mail
 H. Federal Government
 I. State Government
 J. Local Government
 K. Indian Tribe
 L. Other _____

24. CARGO CLASSIFICATIONS (Mark all that apply)

<input type="checkbox"/> A. GENERAL FREIGHT	<input type="checkbox"/> G. BUILDING MATERIALS	<input type="checkbox"/> M. PASSENGERS	<input type="checkbox"/> S. GARBAGE, REFUSE, TRASH	<input type="checkbox"/> Y. PAPER PRODUCT
<input type="checkbox"/> B. HOUSEHOLD GOODS	<input type="checkbox"/> H. MOBILE HOMES	<input type="checkbox"/> N. OIL FIELD EQUIPMENT	<input type="checkbox"/> T. U.S.MAIL	<input type="checkbox"/> Z. UTILITY
<input type="checkbox"/> C. METAL: SHEETS, COILS, ROLLS	<input type="checkbox"/> I. MACHINERY, LARGE OBJECTS	<input type="checkbox"/> O. LIVESTOCK	<input type="checkbox"/> U. CHEMICALS	<input type="checkbox"/> AA. FARM SUPPLIES
<input type="checkbox"/> D. MOTOR VEHICLES	<input type="checkbox"/> J. FRESH PRODUCE	<input type="checkbox"/> P. GRAIN, FEED, HAY	<input type="checkbox"/> V. COMMODITIES DRY BULK	<input type="checkbox"/> BB. CONSTRUCTION
<input type="checkbox"/> E. DRIVE AWAY/TOWAWAY	<input type="checkbox"/> K. LIQUIDS/GASES	<input type="checkbox"/> Q. COAL/COKE	<input type="checkbox"/> W. REFRIGERATED FOOD	<input type="checkbox"/> CC. WATER WELL
<input type="checkbox"/> F. LOGS, POLES, BEAMS, LUMBER	<input type="checkbox"/> L. INTERMODAL CONT.	<input type="checkbox"/> R. MEAT	<input type="checkbox"/> X. BEVERAGES	<input type="checkbox"/> DD. OTHER

25. HAZARDOUS MATERIALS (CARRIER OR SHIPPER) (Mark all that apply)

				(C) CARRIER				(S) SHIPPER				(B) BULK - IN CARGO TANKS				(NB) NON-BULK - IN PACKAGES											
		C	S	B		NB				C	S	B		NB				C	S	B		NB					
A.	DIV 1.1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	K.	DIV 2.2D (Ammonia)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	U.	DIV 4.2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	EE.	HRCQ	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
B.	DIV 1.2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	L.	DIV 2.3A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	V.	DIV 4.3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	FF.	CLASS 8	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
C.	DIV 1.3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	M.	DIV 2.3B	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	W.	DIV 5.1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	GG.	CLASS 8A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
D.	DIV 1.4	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	N.	DIV 2.3C	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	X.	DIV 5.2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	HH.	CLASS 8B	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
E.	DIV 1.5	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	O.	DIV 2.3D	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Y.	DIV 6.2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	II.	CLASS 9	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
F.	DIV 1.6	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	P.	Class 3	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Z.	DIV 6.1A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	JJ.	ELEVATED TEMP MAT.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
G.	DIV 2.1 (Flam. Gas)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Q.	Class 3A	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	AA.	DIV 6.1B	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	KK.	INFECTIOUS WASTE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
H.	DIV 2.1 LPG	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	R.	Class 3B	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	BB.	DIV 6.1 POISON	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	LL.	MARINE POLLUTANTS	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
I.	DIV 2.1 (Methane)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	S.	COMB LIQ	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	CC.	DIV 6.1 SOLID	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	MM.	HAZARDOUS SUB (RQ)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
J.	DIV 2.2	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	T.	DIV 4.1	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	DD.	CLASS 7	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	NN.	HAZARDOUS WASTE	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>				
																						OO.	ORM	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

26. NUMBER OF VEHICLES THAT WILL BE OPERATED IN THE U.S.

	Straight Trucks	Truck Tractors	Trailers	Hazmat Cargo Tank Trucks	Hazmat Cargo Tank Trailers	Motor-coach	Number of vehicles carrying number of passengers (including the driver)													
							School Bus			Mini-bus	Passenger Van		Limousine							
							1-8	9-15	16+	16+	1-8	9-15	1-8	9-15	16+					
OWNED																				
TERM LEASED																				
TRIP LEASED																				

27. DRIVER INFORMATION

	INTERSTATE	INTRASTATE	TOTAL DRIVERS	TOTAL CDL DRIVERS
Within 100-Mile Radius				
Beyond 100-Mile Radius				

28. IS YOUR USDOT NUMBER REGISTRATION CURRENTLY REVOKED BY THE FEDERAL MOTOR CARRIER SAFETY ADMINISTRATION? Yes No

If Yes, enter your USDOT Number. _____

29. PLEASE ENTER NAME(S) OF SOLE PROPRIETOR(S), OFFICERS OR PARTNERS AND TITLES (e.g. president, treasurer, general partner, limited partner)

1. _____ 2. _____

30. CERTIFICATION STATEMENT (to be completed by authorized official)

I, _____ certify that I am familiar with the Federal Motor Carrier Safety Regulations and/or Federal Hazardous Materials Regulations. Under penalties of perjury, I declare that the information entered on this report is, to the best of my knowledge and belief, true, correct, and complete.

Signature _____ Date _____ Title _____ (Please print)