

APPORTIONED REGISTRATION SUPPLEMENT APPLICATION

For Department Use Only

Commercial Registration Section • P. O. Box 68286 • Harrisburg, PA 17106-8286

Α	APPLICAN	T INFO	RMATIC	DN				If yo	ou wish to	have	your re	egistrati	on car	d(s) er	nailed	d to the ema	il addr	ess listed	below u	pon paymen	t, che	ck (🗸) h	ere:
	Acct # Name of Applicant					,					Business Address					City				County			Zip
	***************************************				Danadia Angliadia					Mailing Address						City			County			State	Zip
	***USDOT#	*USDOT# Person to Contact Regarding Application						Mailing Address				ľ			City			County			State	Ζίρ	
	***TIN/EIN E-mail Address						Registration Year					New Vehicle Only					Registration Transfer and				elete Only		
											Increase Weight on Vehicle Originally						Registration Plate Replacement Registration Transfer with Weight Lease Buy Out						
	Telephone Number Fax Number					er						Registered at a Lower Weight				Inc	ncrease						
Б	WEIGHTS								Regi					Registrat	ration Transfer				Correct Information/Update				
В	PA AL			NP	CA			СО		СТ		DC			DE		FL			IA		l id	
			AR		AZ		CA							100				1'-		GA IA			
	IL	IN KS		(S	KY		LA		MA		MD		ME	ME		MI N		ИN	MC	MO MS			MT
	NC	ND NE		NH		NJ		NM		NV		NY	NY		ОН	ОК		OR		RI		SC	
	SD	TN TX UT		VA		VT			WA		WI		WV	WY		AB	AB B			MB			
	NB	NF NS ON PE			QC SK							<u> </u>							1				
С	VEHICLE A	HICLE ADDITIONS																	D DELETE		OR TE	RANSFER	
	1) Title # Vehicle Identification Number					Equipment		t Number	Year	ar Make		Body Type*		oe*	Axles	Seats		el**	1) DELETE TRANSFER				
																						VANSFER	
	Unladen or Chassis	Gross Vehicle	ss Vehicle Weight Gross C			Combination Weight Purchase F		Price Purcha		ise Date Fa		actory Price		***	***USDOT#		****TIN/EIN		Equipment Nu	ımber			
																				Vehicle Identification Number			
	Vehicle Owner (Less	shicle Owner (Lessor Name)				PA Registration Plate Number			er UT Spec Truck		r		Will the designated car responsible for safety change during the year		carrier	arrier YES		1-4					
															ely —				YES NO	Current Regis	Current Registration Plate Number		
) Title #			Vehicle Identification		mber		Equipment	quipment Number			Make	Body Type*		oe*	* Axles		Seats Fu		2) DELETE TRANSFER Equipment Number			RANSFER
	Unladen or Chassis	Wt.	Gross Vehicle Weight		Gross Combination		Weight	Purchase	Price	Purch	chase Date F		Factory Price		***[***USDOT#		****TIN/EIN		Equipment Nu	imber		
																				Vehicle Identif	Vehicle Identification Number		
	Vehicle Owner (Lessor Name)					DA Pogistra	ation Plata N	T Spac Truck	Spec Truck CO Miles						1				1				
	ATTION OWNER (LESSON INGINE)								· I _ I ;			res	Will the designated carrier responsible for safety			L ILS IS th		ne vehicle YE		Current Registration Plate Number			
				YES NO Y		:S ch	change during the		year? NO		a wrecker?		☐ NO										
	*Use one of the following designations for the Body Type: BS – Bus TR – Tractor TK – Truck (Single)													** FUEL D – Diesel G – Gas P - Propane									
	•••USDOT# - US Department of Transportation Number ••••TIN/EIN - Tax Identification Number/Employee Identification Number														Н	l - Hybr	id	N - Natur	- Natural Gas O - Other				
Е	INSURANC	E AND	ACKNO	OWLEDGE	MEN	IT																	
	I acknowledge that I may lose my operating privilege or vehicle registration for failure to maintain fin vehicle for the period of registration. My signature attests to my knowledge of all applicable State an									nd Federal Motor Carrier safety law				ered	NAIC#				Insurance Company Name				
	regulations. My signature attests to the fact that this vehicle is a moto						carrier vehicle and it has a current valid safety in					on.	- ⊢		Policy Number				Effective Date		E	xpiration D	ate
		Applicant or Authorized Signer					Titile						Date	— ļ		Ni veste e :-	سنام گ	llast				!m 4l *!	
		- The Date												Number of duplicate cab cards for each vehicle in the fleet:									

Section A - Applicant Information

Enter the apportioned account number, the applicant name that appears on the apportioned account, 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 bona fide numbered street address. Post Office Box addresses alone are not permitted. The Pennsylvania Vehicle Code requires actual or bona fide addresses on applications for title and registration. Also fill in the applicant's USDOT number (US Department of Transportation Number), contact person, TIN/EIN (Tax Identification Number/Employee Identification Number), e-mail address, and registration year, telephone number and fax number. Check the appropriate box that best describes the transaction you are requesting. **NOTE:** If you wish to have your registration card(s) emailed upon payment, check the box at the top of Section A.

Section B - Weights

Enter the maximum weight of the vehicles you wish to register to your apportioned fleet in the boxes labeled for each jurisdiction.

Section C - Vehicle Additions

List the vehicle information to be added to the fleet. If the vehicle is a wrecker, please check the box contained in this section. If the vehicle is leased, list the lessee's USDOT number and TIN/EIN. A copy of the lease agreement must be submitted with this application. If a vehicle is being added to the fleet with existing Pennsylvania registration, include the registration plate number in this section to obtain credit. If an existing apportioned plate is being transfered to the added vehicle, list the transfer information in Section D.

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 TIN/EIN of the motor carrier responsible for safety. Also, indicate if the motor carrier responsible for safety will change during the registration year.

Section D - Delete or Transfer Information

Check the appropriate box for Deletion or Transfer. Also provide the equipment number, Vehicle Identification Number (VIN) and current registration plate number of the vehicle to be deleted or transferred.

If the vehicle is being deleted, the registration plate must be returned to the Commercial Registraton Section. **NOTE:** Once the registration plate has been placed on the vehicle or a temporary has been issued, they are automatically classified as **USED. NO REFUND** of the fees will be issued for **USED** registration plates.

Section E - Insurance and Acknowledgement

Fill in your insurance information in the spaces provided including the NAIC number, company name, policy number, and the effective and expiration dates. **NOTE:** The insurance information listed can only be for full liability coverage.

If you are requesting any duplicate cab cards, enter the total number of duplicates being requested for each vehicle. Signature of the owner or authorized representative of the apportioned account, title and date must be included on the form.