



# Freight Carrier Registration Program

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### Identification

\*SCAC:  SSTS  \*DUINS #:   
\*Operator's #:  PC/NX  411353   
\*Legal Name:   
DBA:

### Location

\*Street1:  Street2:   
\*City:  \*State:   
Zip:  \*Country:  USA   
\*Phone:  \*Int'l Phone:

### Contact Information

\*CEO Name:  \*Email:   
\*CFO Name:  \*Email:   
GM Name:  Email:   
POC Name:  Email:

### Level of Service

\*DOT Authority:  General Commodity(FAX)  \*Transportation Protective Services:  No   
\*Modes:  Motor

NOTE: Fields marked with an \* are mandatory!

Version 8.1

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