

Instructions for Completing Form OP-1(P) Application for Motor Passenger Carrier Authority

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I. Overview of Operating Authority

Depending upon the type of business operation (Motor Carrier, Broker, Freight Forwarder, Shipper, Vehicle Registrant, and/or Cargo Tank Facility) and what will be transported (property, hazardous materials, and/or passengers), companies may be required to register for both Interstate Operating Authority (Form OP-1 series or Form OP-2) and USDOT Number (Form MCS-150 series). The Federal Motor Carrier Safety Administration (FMCSA) enforces compliance with the Federal Motor Carrier Safety Regulations (FMCSRs) and the Hazardous Materials Regulations (HMRs), which govern safety and financial responsibility. FMCSA's registration requirements reflect the focus on both of these concerns.

FMCSA encourages all applicants with Internet access to use the online registration assistant at <http://www.fmcsa.dot.gov/online-registration> in order to determine FMCSA's registration requirements. Applicants without Internet access can call FMCSA at 1-800-832-5660 for assistance.

Who Needs Operating Authority?

Before beginning **interstate** operations in the United States (U.S.), all authorized for-hire Motor Carriers of non-exempt property and passengers, Brokers, and Freight Forwarders based in the U.S. or Canada must obtain Operating Authority by submitting the appropriate form(s) in the OP-1 series. For a description of the different types of OP-1 forms and the various FMCSA requirements for obtaining Operating Authority, please see "[What Are the Steps in Getting Operating Authority?](#)" (Topic IV) in this packet.

NOTE:

- Hawaii-based Motor Carriers that transport household goods, property or passengers within a terminal area (see 49 U.S.C. § 13504) must obtain Operating Authority. Carriers that operate solely within the State of Hawaii and do not transport household goods are *not* required to obtain Operating Authority.
- Mexico-based Motor Carriers should refer to http://www.fmcsa.dot.gov/espanol/forms_sp.htm (Spanish) or <http://www.fmcsa.dot.gov/espanol/english/forms.htm> (English) for more information.

In addition to Operating Authority, some Motor Carriers of property or passengers must obtain a USDOT Number before beginning interstate operations. Please consult "What Forms Do I Need to Complete?" at <http://www.fmcsa.dot.gov/reg-forms> which specifies the required forms for both Operating Authority and USDOT Number.

II. How to Apply

Applications may be submitted online or mailed to FMCSA. Compared to mailing, the online method reduces processing time by as much as 2-3 weeks, thus enabling companies to begin their operations sooner.

Remember, operations cannot begin until the certificate, permit, or license for Operating Authority has been received. For more information, see "[What Are the Steps in Getting Operating Authority?](#)" (Topic IV) in this packet.

Apply Online

Applying online requires the use of a valid credit card (American Express, Discover, MasterCard, or Visa). Those who do not wish to submit their credit card information online must complete the application and payment by mail (see “Apply by Mail” below).

The following tips are encouraged:

- Go to <http://www.fmcsa.dot.gov/online-registration> and complete the “Step-by-Step Registration Guide” prior to starting the application. The registration guide will lead users through a series of questions. Based upon the answers to the questions, the guide will identify required registration forms and link users directly to the online application form.
- Utilize the form instructions during the completion of the online form. This will help to ensure that the application is completed accurately.

NOTE:

- The applicant’s legal name (or the authorized representative’s name) must match the name and billing address of the credit card.
- Record the MC or FF Number that is provided after approval of the application. This number will be needed on the insurance and process agent forms that are required to complete the application process for obtaining Operating Authority (for more details, see “[What Are the Steps in Getting Operating Authority?](#)” (Topic IV) in this packet). This number may also be needed for any correspondence with the FMCSA.

Apply by Mail

Follow the steps below:

- 1) Applicants with Internet access are encouraged to go to <http://www.fmcsa.dot.gov/online-registration> and complete the “Step-by-Step Registration Guide” in order to identify required registration forms.
- 2) Go to <http://www.fmcsa.dot.gov/print-form> to download and print the appropriate form(s) and instructions. Applicants may also call FMCSA at 1-800-832-5660 to request an application packet by mail.
- 3) Follow the instructions to complete the application form(s).
- 4) Save a copy of the application and all supporting documents for the company’s business records.
- 5) Mail the completed application form(s), any supporting documents, and payment to one of the following addresses depending upon the type of payment (and method of mail delivery):
 - **Check or Money Order** (Make payable to the FMCSA in U.S. dollars)

First-Class Mail

Federal Motor Carrier Safety Administration
P.O. Box 70935
Charlotte, NC 28272-0935

Express Mail

QLP Wholesale Lockbox – NC0810
Lockbox #70935
1525 West WT Harris Blvd.
Charlotte, NC 28262

- **Credit Card** (MasterCard or Visa only)
Federal Motor Carrier Safety Administration
1200 New Jersey Avenue SE, MC-RIO
Washington, DC 20590

NOTE: Sending payment to the wrong address will delay application processing by 2-3 weeks.

III. What Is the Cost?

Operating Authority\$300.00 each

- **Form OP-1**
 - o Motor Common Carrier of Property (except Household Goods)
 - o Motor Contract Carrier of Property (except Household Goods)
 - o Motor Common Carrier of Household Goods
 - o Motor Contract Carrier of Household Goods
 - o Broker of Property (except Household Goods)
 - o Broker of Household Goods
 - o United States-based Enterprise Carrier of International Cargo (except Household Goods)
 - o United States-based Enterprise Carrier of International Household Goods
- **Form OP-1(P)**
 - o Motor Common Carrier of Passengers
 - o Motor Contract Carrier of Passengers
- **Form OP-1(FF)**
 - o Freight Forwarder of Property (except Household Goods)
 - o Freight Forwarder of Household Goods

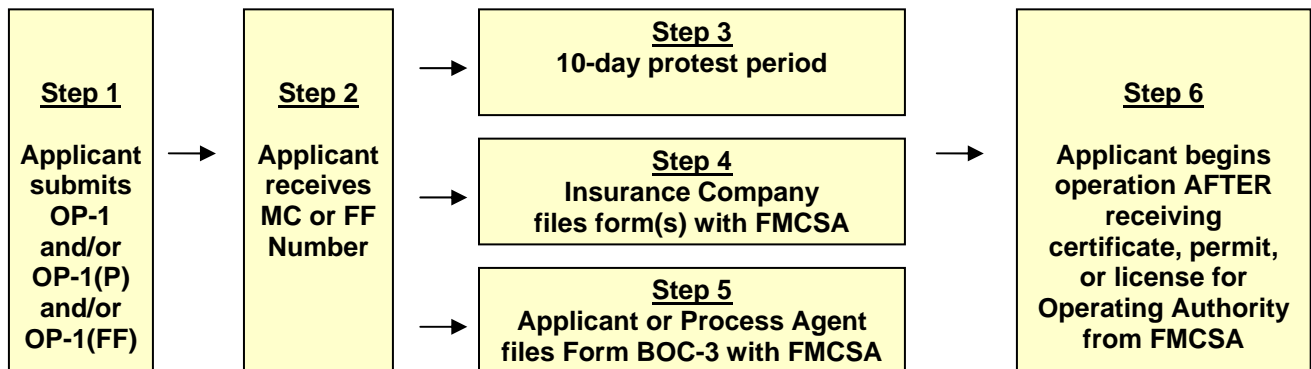
For descriptions of the different types of Operating Authority, see “[SECTION II – Type of Authority](#)” under “[How to Complete the OP-1\(P\) Application for Motor Passenger Carrier Authority](#)” (Topic V) in this packet.

NOTE:

- **REFUNDS ARE NOT PERMITTED.**
- **Each type of Operating Authority requires an additional \$300 fee.** For example, an application for both Motor Common Carrier of Passengers and Motor Contract Carrier of Passengers will require two \$300 fees for a total of \$600. Multiple fees can be combined into a single payment.
- The FMCSA reserves the right to discontinue processing any application for which insufficient payment is received.

IV. What Are the Steps in Getting Operating Authority?

For Motor Carriers, Brokers, and Freight Forwarders based in the U.S. or Canada, the Operating Authority application process includes the six steps shown below. Motor Carriers based in Hawaii or Mexico should see the NOTE in “[Overview of Operating Authority](#)” (Topic I) in this packet.



Step 1 – Application for Operating Authority

Motor Carriers, Brokers, and Freight Forwarders begin the Operating Authority application process by submitting one (or more) of the following forms with the appropriate application processing fee:

- **OP-1** - Operating Authority for:
 - **Motor Carrier** (common property, contract property, common household goods, or contract household goods)
 - **Broker** (property or household goods)
 - **United States-based Enterprise Carrier** (international cargo or international household goods)
- **OP-1(P)** - Operating Authority for **Motor Passenger Carrier** (common or contract)
- **OP-1(FF)** - Operating Authority for **Freight Forwarder** (property or household goods)

NOTE:

- For descriptions of the different types of Operating Authority, see “[SECTION II – Type of Authority](#)” under “[How to Complete the OP-1\(P\) Application for Motor Passenger Carrier Authority](#)” (Topic V) in this packet.
- To identify the required form(s) for Operating Authority as well as USDOT Number, see “What Forms Do I Need to Complete?” at <http://www.fmcsa.dot.gov/reg-forms>.

Step 2 – Grant Letter and MC/FF Number

Applicants will receive a grant letter after FMCSA processes and accepts the Operating Authority application as follows:

- If applying online, a Motor Carrier (MC) or Freight Forwarder (FF) Number will be provided immediately and the confirmation grant letter will arrive via mail.
- If applying by mail, the grant letter should arrive via mail in approximately 4 weeks. This letter will include the MC or FF Number. Applicants have the option of checking the status of their application online. See “[Information Sources](#)” (Topic VI) in this packet for instructions.

Insurance Companies and Process Agents will use the MC or FF Number to make the appropriate filings on behalf of applicants to complete the application process for obtaining Operating Authority.

NOTE: Although an MC or FF Number has been assigned, this does not represent Operating Authority. The company may not begin to operate until it has received the corresponding certificate, permit, or license for Operating Authority described in [Step 6](#).

Step 3 – 10-day Protest Period

At the same time the grant letter is mailed, each company’s application for Operating Authority will be published in the *FMCSA Register*. This publication initiates the 10-calendar-day protest period, during which any individual can file a protest with FMCSA stating why a company should not be issued Operating Authority. FMCSA will accept protests sent by mail as long as they are postmarked by the last day of the protest period. FMCSA will provide the applicant with information on the adjudication process if any protests are filed. During this protest period, Insurance Companies and Process Agents can file the necessary documents detailed in Step 4 and Step 5 below.

To view the *FMCSA Register*, go to <http://li-public.fmcsa.dot.gov> and then follow the steps below:

- 1) Read the introductory page and then click the “Continue” link
- 2) Select the “FMCSA Register” option in the dropdown menu and click “Go”

Step 4 – Insurance

This step can begin any time after an applicant receives its MC or FF Number as described in Step 2 above and is not dependent on Step 3 being completed. An Insurance Company must file the appropriate insurance form(s) on behalf of the applicant within 90 days of the date the application for Operating Authority was published in the *FMCSA Register*. Otherwise, the application for Operating Authority will be dismissed and the application fee will not be refunded. The applicant will receive a warning letter about the 90-day deadline if FMCSA has not received the required documentation within 20 days.

NOTE:

- Applicants may not file insurance forms on their own behalf. Therefore, FMCSA does not provide insurance forms to applicants.
- An authorized representative from the home or branch office of an Insurance Company must file the required insurance form(s) on the applicant's behalf.
- To minimize processing delays, FMCSA recommends filing forms electronically.
- It is the applicant's responsibility to follow up with the Insurance Company to verify that FMCSA has received and approved the required insurance form(s).
- Check the status of insurance filings by either accessing the FMCSA Web site (see "[Information Sources](#)" (Topic VI) in this packet for instructions) or calling FMCSA toll-free at 1-866-637-0635 or 202-385-2423 (Monday through Friday, 8 a.m. to 4:30 p.m. e.s.t.).

FMCSA requires the following insurance form for applicants requesting Operating Authority as a Motor Carrier of Passengers:

- Form BMC-91 or BMC-91X for proof of bodily injury and property damage (BI & PD) insurance

Motor Carriers of Passengers are required to maintain BI & PD insurance as follows:

- \$1,500,000 minimum liability coverage is required if **all** vehicles in the company fleet have a seating capacity of 15 passengers (including the driver) or fewer
- \$5,000,000 minimum liability coverage is required if **any** vehicle in the company fleet has a seating capacity of 16 passengers (including the driver) or more

NOTE: Passenger Carriers that are Federal Transit Administration grantees (Transit Benefit Operators) under 49 U.S.C. 5307, 5310, or 5311 are required to maintain liability insurance at least at the highest level required by any of the States in which the transit service area is located. FMCSA will waive the \$300 filing fee for the OP-1(P) Application for Motor Passenger Carrier Authority for Transit Benefit Operators.

The following forms are not required by Motor Carriers of Passengers:

- Form BMC-34 for cargo liability
- Form BMC-84 for broker surety bond
- Form BMC-85 for broker trust fund agreement

For more details about which insurance/financial form(s) FMCSA requires, please see 49 CFR Part 387. To view this information, go to the FMCSA Web site at <http://www.fmcsa.dot.gov> and search for "387" in the Rules & Regulations search box.

Self Insurance

Motor Carriers, U.S.-based Enterprise Carriers, and Freight Forwarders may qualify as a self-insurer against bodily injury, property damage, and cargo liability claims, by submitting Form BMC-40 (Application for Authority to Self-Insure) and evidence to the FMCSA to demonstrate the existence of the following:

- Adequate tangible net worth that will cover any liability claims in the event of a loss
- Sound self-insurance program
- Adequate safety program

FMCSA will approve an application to self-insure subject to appropriate and reasonable conditions. For more details about self insurance, see 49 CFR § 387.309 and § 387.411.

Step 5 – Process Agent

This step can begin any time after an applicant receives its MC or FF Number as described in Step 2 above. FMCSA requires each applicant for Operating Authority to designate a Process Agent in every State in which it conducts business or maintains an office. A Process Agent is a representative upon whom court papers may be served in any legal proceeding brought against a Motor Carrier, Broker, or Freight Forwarder.

Motor Carriers of Property and/or Passengers, and CMV-operating Freight Forwarders:

- must designate a Process Agent in each State that they operate in or through.
- can act as their own Process Agent in the State in which they maintain a physical office (P.O. Box address is not considered a physical office).

Brokers and Freight Forwarders that will not operate CMVs:

- must designate a Process Agent in each State in which they maintain an office or establish contracts.
- can act as their own Process Agent in the State in which they maintain a physical office (P.O. Box address is not considered a physical office).

Either the applicant or Process Agent, on behalf of the applicant, can file Form BOC-3 (Designation of Process Agents) with the FMCSA. This form must be filed within 90 days of the date the application for Operating Authority was published in the *FMCSA Register*. Failure to meet this deadline will result in dismissal of the Operating Authority application and loss of the application fee. The applicant will receive a warning letter about the 90-day deadline if FMCSA has not received the required documentation within 20 days. To minimize processing delays, FMCSA recommends electronically filing Form BOC-3 at <http://li-public.fmcsa.dot.gov>.

For a fee, many commercial companies will arrange a Process Agent in any State. Some companies offer “blanket coverage,” which designates a Process Agent in every U.S. State. For a list of Process Agent companies, visit the FMCSA Web site at <http://www.fmcsa.dot.gov/process-agent>. For more details about Process Agent designation, see 49 CFR Part 366.

Step 6 – Certificate, Permit, or License of Operating Authority

After FMCSA has approved the application, insurance, and process agent filings, and the protest period has ended without any protests, applicants are issued Operating Authority in the form of a certificate (Motor Carrier), permit (Freight Forwarder), or license (Broker). **Applicants may not begin operations until this official record of Operating Authority is received by mail.**

State Regulations and Requirements

In addition to Federal requirements, all applicants must comply with registration, fuel tax, and other State regulations and procedures. Before beginning new or expanded interstate operations, applicants must familiarize themselves with the various State rules applicable to interstate companies in each State in which they plan to operate. Begin this process by contacting the transportation regulatory agency for the State in which the applicant is located.

V. How to Complete the OP-1(P) Application for Motor Passenger Carrier Authority

These instructions will assist companies in accurately completing the application. **Incomplete or incorrect applications will be delayed or suspended until the applicant has been contacted and the problems have been resolved. If an application is rejected, the application fee will not be refunded.**

NOTE FOR APPLICATIONS THAT WILL BE MAILED:

- Please **print clearly in ink** or **type** all information.
- If more space is needed to complete any section on the application form, please attach a separate sheet of paper and label each page with the applicant's legal business name, section number on the form, and item description.
- Retain a copy of the completed application form and any supporting attachments for the company's business records.
- For additional mailing instructions, please see "[Apply by Mail](#)" under "[How to Apply](#)" (Topic II) in this packet.

SECTION I – Applicant Information

All Passenger Carrier applicants must complete this section.

FMCSA Authority

Select the "YES" response if either of the following conditions are true:

- Operating Authority was previously issued by the Interstate Commerce Commission (ICC), Federal Highway Administration (FHWA), Office of Motor Carrier Safety (OMCS), or Federal Motor Carrier Safety Administration (FMCSA)
- An application for Operating Authority is currently being processed by FMCSA

If neither of the conditions above apply, then select the "NO" response.

If the "YES" response is selected, indicate the MC/FF Number (for example: MC-999999), which is also called the lead docket number. To search for the MC/FF Number, follow the instructions provided under "MC/FF Number" in "[Information Sources](#)" (Topic VI) in this packet.

Legal Business Name

Enter the full legal name of the business entity (i.e., corporation, sole proprietorship/individual, or partnership) that owns/controls the Motor Carrier or Broker operation. This should be the same name that appears on the incorporation certificate, partnership agreement, tax records, etc. Examples are as follows:

- *Corporation* — Enter the full legal name on the incorporation certificate. This name must include the type of corporation, such as: John Doe Inc. or John Doe LLC
- *Sole Proprietorship/Individual* — Enter the full legal name, such as: John A. Doe
- *Partnership* — Enter the full legal names of all partners, such as: John A. Doe and Jane B. Smith

NOTE: To avoid delays in obtaining Operating Authority, the Legal Business Name on the OP-1(P) application must match the name submitted on insurance documents, Form BOC-3 (Designation of Process Agents), and Form MCS-150 (Application for USDOT Number, which is required for Motor Carriers only).

Doing Business As Name

Leave this item blank unless the Doing Business As (DBA) Name or Trade Name is different from the Legal Business Name entered above. For example: enter "John's Trucking Company" here if the business operates under this name, but John A. Doe is the Legal Business Name.

NOTE: It is important to spell, space, and punctuate the business name the same exact way each time it appears on an application; any difference will be considered a different company. For example: John Jones Trucking Co., Inc.; J. Jones Trucking Co., Inc.; and John Jones Trucking are considered three separate companies.

Business Address

Enter the physical street address of the company's principal place of business. If there is more than one business location, provide the address where most of the company's safety records are maintained. For example: 756 Bounty Street or 15433 State Highway 23.

NOTE: A P.O. Box may not be entered as the Business Address on the OP-1(P) form. Also, if applying for a USDOT Number, this Business Address must match the Principal Address on the MCS-150 application.

Mailing Address

Enter the mailing address where all correspondence from FMCSA should be sent. Leave this item blank if the Mailing Address is the same as the Business Address.

NOTE: In order to receive pertinent FMCSA notices and verification that insurance documents have been filed on the applicant's behalf, please notify FMCSA of Business or Mailing Address changes by one of the following methods:

- Online at <http://www.fmcsa.dot.gov>
- Fax information to 202-366-3477
- Mail information in writing to 1200 New Jersey Avenue SE, MC-RIO, Washington, DC 20590, Attention: Address Change

Please include Legal Business Name and MC Number (also called lead docket number).

Representative

If someone other than the applicant is preparing the application, provide the representative's name, title/position or relationship to the applicant, business address, and business telephone and fax numbers. This representative will be contacted if questions concerning this application arise.

USDOT Number

Enter the USDOT Number if one has been assigned. If not, please consult "What Forms Do I Need to Complete?" at <http://www.fmcsa.dot.gov/reg-forms> to determine whether a USDOT Number must be obtained.

To find a company's USDOT Number, use either method below:

- Go to <http://safer.fmcsa.dot.gov>
 - 1) Then click "Licensing & Insurance" under "FMCSA Searches"
 - 2) Enter a Legal Name or DBA Name AND the State in which the company headquarters are located
 - 3) Click "Search"
- Call FMCSA at 1-800-832-5660

NOTE: All applicants subject to the Federal Motor Carrier Safety Regulations are required to register with the Federal Motor Carrier Safety Administration of the U.S. Department of Transportation before beginning business operations. For more information, please visit FMCSA's Web site at <http://www.fmcsa.dot.gov/online-registration> or call 1-800-832-5660.

Form of Business

Select only **one** category and provide the requested information:

- *Corporation* — Provide the name of the State where the corporation is incorporated.
 - *Sole Proprietorship/Individual* — Provide the full legal name of the individual who is the business owner. This name should match the name entered under Legal Business Name.
 - *Partnership* — Provide the full legal name of **each** partner. These names should match the names entered under Legal Business Name.
-

SECTION II – Type of Operating Authority

All Passenger Carrier applicants must complete this section. Check all boxes that apply.

NOTE:

- A **\$300 fee** is required for **each type** of Operating Authority requested. Carefully select only the type(s) of Operating Authority relevant to the business. **FMCSA does not refund application fees.**
- FMCSA will waive the \$300 filing fee for the OP-1(P) Application for Motor Passenger Carrier Authority for Transit Benefit Operators who are grantees under 49 U.S.C. 5307, 5310, or 5311. The online application process does not accommodate this fee waiver, so applicants must **mail** the completed application form with “TRANSIT BENEFIT OPERATOR” typed or printed at the top of page 1, in the box in Section III, and in the Payment Instructions section.

Descriptions of the different types of interstate Operating Authority are as follows:

- ***Motor Common Carrier of Passengers*** — An authorized for-hire Motor Carrier that transports passengers for the general public in exchange for payment that is based on published tariff rates. Common Carriers are distinguished by the following characteristics:
 - o Service is regular
 - o Customers are not readily predictable and are changeable
 - o Business is solicited from the general public; for example, by advertising
 - o Law and regulations define the responsibilities of the parties
 - ***Motor Contract Carrier of Passengers*** — An authorized for-hire Motor Carrier that only transports passengers while under contract to specific customers. Payment is based on negotiated contract rates. Contract Carriers are distinguished by the following characteristics:
 - o Service may be occasional
 - o Customers are identifiable and stable
 - o Business is solicited on a targeted and individualized basis
 - o Negotiated contracts define the responsibilities of the parties, rates, and payments
-

SECTION III – Insurance Information

All Passenger Carrier applicants must complete this section. Select only **one** response.

Both Motor Common Carriers of Passengers and Motor Contract Carriers of Passengers must maintain bodily injury and property damage (public liability) insurance. The insurance coverage requirements depend upon the seating capacities of the commercial motor vehicles that the company plans to operate:

- \$1,500,000 minimum liability coverage is required if **all** vehicles in the company fleet have a seating capacity of 15 passengers (including the driver) or fewer

- \$5,000,000 minimum liability coverage is required if **any** vehicle in the company fleet has a seating capacity of 16 passengers (including the driver) or more

NOTE: Passenger Carriers that are Federal Transit Administration grantees (Transit Benefit Operators) under 49 U.S.C. 5307, 5310, or 5311 are required to maintain liability insurance at least at the highest level required by any of the States in which the transit service area is located.

A representative from either the home or branch office of an insurance company must file Form BMC-91 or BMC-91X on behalf of the applicant within 90 days of the date the application for Operating Authority was published in the *FMCSA Register*. Otherwise, the application for Operating Authority will be dismissed and the application fee will not be refunded. Call FMCSA at 1-866-637-0635 to obtain information about insurance. For more information about insurance requirements and procedures, refer to “[Step 4](#)” under “[What Are the Steps in Getting Operating Authority?](#)” (Topic IV) in this packet.

SECTION IV – Safety Certification

All Passenger Carrier applicants must complete this section. Select only **one** response.

Applicants must first determine whether they are subject to the Federal Motor Carrier Safety Regulations (FMCSRs) at 49 CFR, Chapter 3, Subchapter B (Parts 350-399).

An applicant is subject to the FMCSRs if it will operate any of the following commercial motor vehicles in interstate commerce:

- A vehicle with a gross vehicle weight rating or gross combination weight rating, whichever is greater, of 10,001 pounds (4,537 kilograms) or more
- A vehicle designed or used to operate to transport between 9 and 15 passengers (including the driver) for compensation
- A vehicle designed or used to transport 16 or more passengers (including the driver)
- Any size vehicle used in the transportation of materials which are designated as hazardous by the Hazardous Materials Transportation Act (49 U.S.C. 5101 et seq.) and which requires the vehicle to be placarded according to the Hazardous Materials Regulations (49 CFR, Chapter I, Subchapter C)

Applicants that are subject to the FMCSRs must read the statements under the heading titled “APPLICANTS SUBJECT TO FEDERAL MOTOR CARRIER SAFETY REGULATIONS.” These statements describe the activities that Passenger Carriers must follow in order to comply with the FMCSRs. Select the “YES” response in this part only if the applicant attests that all of the statements are true.

Applicants that will not operate any of the commercial motor vehicles specified above are exempt from the FMCSRs and must complete the safety certification under the heading titled “EXEMPT APPLICANTS.” Read the corresponding statement and select the “YES” response in this part only if the applicant attests that the entire statement is true.

SECTION V – Compliance Certification

All Passenger Carrier applicants must complete this section.

Read the statement and select the “YES” response only if the statement is true.

Private entities that are primarily in the business of transporting people, whose operations affect commerce, and that transport passengers in an over-the-road bus (defined as a bus characterized by an elevated passenger deck over a baggage compartment) are subject to the U.S. Department of Transportation’s Americans with Disabilities Act regulations located at 49 CFR Part 37, Subpart H. For a general overview of these regulations, go to the Federal Motor Carrier Safety Administration’s website at www.fmcsa.dot.gov.

SECTION VI – Government Funding Status

All Passenger Carrier applicants must complete this section. Select only **one** response.

Applicants that currently receive, or have received in the past, governmental financial assistance for the acquisition or operation of a bus must indicate their funding status by selecting either the “Public recipient” or “Private recipient” response.

Applicants that do not receive any government funding or use equipment acquired with governmental financial assistance should select the “Non-recipient” response.

NOTE:

- Applicants that choose to mail the application should attach a separate sheet of paper which details the requested evidence.
- **Public recipient** applicants for charter or special transportation must submit the evidence requested in this section of the application form.
- **Regular route** applicants and **private recipient** applicants may optionally submit supplemental evidence with this application which describes the Public Interest Criteria specified in this section of the form. This evidence may be needed if the application is protested.
- Applicants for charter and special transportation that are **non-recipients** of governmental financial assistance and applicants requesting Operating Authority as a **Motor Contract Carrier of Passengers** do not need to submit additional evidence.

SECTION VII – Scope of Operating Authority

All Passenger Carrier applicants must complete this section. Check all boxes that apply.

This section corresponds to the type(s) of Operating Authority selected in “[SECTION II – Type of Authority](#)” of the OP-1(P) application form. Items 1 through 5 are applicable to Operating Authority for Motor Common Carriers of Passengers. Item 6 applies to Operating Authority for Motor Contract Carriers of Passengers. Finally, item 7 deals with Operating Authority that is not covered by items 1 through 6.

NOTE:

- “Regular Routes” refer only to Passenger Carriers that perform regularly scheduled service between designated points and in the case of public recipient applicants, operate over named roads or highways.
- Special and charter operations and Motor Contract Carriers do not operate Regular Routes.
- Public recipient applicants that request Operating Authority for Regular Routes must submit a detailed narrative description of the route(s) and a corresponding map that graphically displays the path of the route with the application.
- Charter and special transportation corresponds to demand responsive service and service over regular routes corresponds to fixed route service under the Americans with Disabilities Act regulations for over-the-road bus companies located at 49 CFR Part 37, Subpart H.

SECTION VIII – Affiliations

Only applicants with any relationship within the past 3 years to any business entity regulated/licensed by the FMCSA, ICC, FHWA, or OMCS must complete this section.

Examples of an affiliation or relationship include, but are not limited to, owning another company (even a percentage of stock), providing a loan to another company, managing another company, or having a family relationship with an owner or manager of another company.

Disclose any past or current relationship within the last 3 years by providing the following:

- Description of affiliation or relationship
- Name of the company
- MC/FF Number

- USDOT Number
 - Latest DOT safety rating (for more information, see "[Information Sources](#)" (Topic VI) in this packet)
-

SECTION IX – Applicant’s Oath

All applicants must complete this section. False certifications are subject to the penalties described in the oath.

Type or print the name and title of an individual authorized to sign documents on behalf of the company that is applying for Operating Authority. The authorized signer is one of the following:

- In the case of a sole proprietorship, the owner
- In the case of a partnership, an official partner
- In the case of a corporation, an authorized employee in the ownership structure
- An individual with power of attorney to act on behalf of the applicant (proof of the power of attorney must be submitted with the application)

NOTE: If this application is not signed and dated by an authorized individual, the application will be REJECTED and interstate Operating Authority will NOT be issued.

VI. Information Sources

For general information and guidance regarding applications, please visit the FMCSA Web site at <http://www.fmcsa.dot.gov> or call FMCSA at 1-800-832-5660.

Status of Application, Insurance, and Process Agent Filings

To check the status, use either of the following methods after FMCSA has processed your application:

- Go to the FMCSA Web site at <http://www.fmcsa.dot.gov>
 - 1) Then click “Registration & Licensing”
 - 2) Then click “Licensing & Insurance System”
 - 3) Read the introductory page and click “Continue”
 - 4) Select “Carrier Search” in the dropdown menu and click “Go”
 - 5) Follow the search instructions
- Call FMCSA's automated telephone system at 1-866-637-0635, which is available 24 hours a day, 7 days a week. Please have your MC/FF Number (also called docket number) available when you call. You will receive your MC/FF Number in the grant letter (see Step 2 in "[What Are the Steps in Getting Operating Authority?](#)" (Topic IV) in this packet).

MC/FF Number

To find a company’s MC/FF Number, go to <http://li-public.fmcsa.dot.gov> and conduct a search as follows:

- 1) Read the introductory page and click “Continue”
- 2) Select “Carrier Search” in the dropdown menu and click “Go”
- 3) Follow the search instructions (for State, enter the location of the company headquarters)

Those without Internet access can call 202-385-2423 or 1-800-832-5660 for assistance.

USDOT Number Registration

To obtain a USDOT Number, either apply online or by mail as follows:

- Apply online at <http://www.fmcsa.dot.gov/online-registration>, which provides a USDOT Number immediately after successful completion of the online form.
- Go to <http://www.fmcsa.dot.gov/print-form>, print the appropriate MCS-150 form(s), and mail the completed form(s) to FMCSA. Those without Internet access should call 1-800-832-5660 to request forms by mail.

Hazardous Materials Regulations

To determine whether any of the commodities you intend to transport are considered to be hazardous materials, refer to the Federal Hazardous Materials Regulations in Parts 100 through 185 of Title 49 of the Code of Federal Regulations (CFR), particularly the Hazardous Materials Table at 49 CFR Part 172. These regulations are available online at <http://hazmat.dot.gov/regs/rules.htm>. Contact the FMCSA at 202-366-6121 if assistance is needed.

To obtain information about DOT hazardous material transportation registration requirements, call 202-366-4109.

Safety Rating

If a safety rating has already been assigned, view your status online at <http://www.fmcsa.dot.gov> (click "Company Safety Snapshot") or call 1-800-832-5660.

To request a safety fitness review, please contact your local FMCSA field office. To find contact information for your local field office, either:

- Visit the FMCSA Web site at <http://www.fmcsa.dot.gov/field-office>
- Call 1-800-832-5660



According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The OMB control number for this collection is 2126-0016. It is estimated that an average of 2 burden hours per response is required to complete this collection of information. This estimate includes time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Comments concerning the accuracy of this burden estimate or suggestions for reducing this burden should be directed to the Federal Motor Carrier Safety Administration, Systems Operations Team, 1200 New Jersey Avenue SE, Washington, DC 20590.

U.S. Department of Transportation
Federal Motor Carrier Safety Administration

FORM OP-1(P) APPLICATION FOR MOTOR PASSENGER CARRIER AUTHORITY

This application is for all businesses requesting operating authority as motor passenger common or contract carriers.

FOR FMCSA USE ONLY	
Docket No. MC	Fee No.
Filed	CC Approval No.

SECTION I Applicant Information

Do you now have authority from or an application being processed by the FMCSA, FHWA, OMCS, or ICC?
 YES NO If yes, identify the MC/FF Number (or lead docket number): _____

LEGAL BUSINESS NAME	DOING BUSINESS AS NAME <i>(If different from Legal Business Name)</i>
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BUSINESS ADDRESS

Physical Street Name and Number	City	State	Zip Code	Telephone Number
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MAILING ADDRESS *(If different from Business Address above)*

Physical Street Name and Number	City	State	Zip Code
---------------------------------	------	-------	----------

REPRESENTATIVE *(Person who can respond to inquiries)*

Name	Title, Position, or Relationship to Applicant			
Street Name and Number	City	State	Zip Code	
Telephone Number	Fax Number			

USDOT NUMBER *(If available; if not, see instructions)*

FORM OF BUSINESS *(Select only one)*

Corporation	State of Incorporation	_____
Sole Proprietorship	Legal Name of Owner	_____
Partnership	Legal Name of Each Partner	_____ <i>(separate names with a comma)</i>

SECTION II Type of Operating Authority

Check box(es) for each type of Operating Authority requested. **You must submit a filing fee of \$300.00 for each box checked.**

<input type="checkbox"/> Motor Common Carrier of Passengers	<input type="checkbox"/> Motor Contract Carrier of Passengers
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SECTION III Insurance Information

All motor passenger carrier applicants must maintain public liability insurance. The amounts in parentheses represent the minimum amount of coverage required. Applicant will use vehicle with seating capacities of (select only one):

16 passengers or more (\$5,000,000) 15 passengers or fewer only (\$1,500,000)

SECTION IV Safety Certification**APPLICANTS SUBJECT TO FEDERAL MOTOR CARRIER SAFETY REGULATIONS.**

If you are subject to pertinent portions of the U.S. DOT's Federal Motor Carrier Safety Regulations (FMCSRs) at 49 CFR, Chapter 3, Subchapter B (Parts 350-399), you must certify as follows:

Applicant has access to and is familiar with all applicable U.S. DOT regulations relating to the safe operation of commercial vehicles and the safe transportation of hazardous materials and it will comply with these regulations. In so certifying, applicant is verifying that, at a minimum, it:

- (1) Has in place a system and an individual responsible for ensuring overall compliance with FMCSRs;
- (2) Can produce a copy of the FMCSRs and the Hazardous Materials Transportation Regulations;
- (3) Has in place a driver safety training/orientation program;
- (4) Has prepared and maintains an accident register (49 CFR Part 390.15);
- (5) Is familiar with DOT regulations governing driver qualifications and has in place a system for overseeing driver qualification requirements (49 CFR Part 391);
- (6) Has in place policies and procedures consistent with DOT regulations governing driving and operational safety of motor vehicles, including drivers' hours of service and vehicle inspection, repair, and maintenance (49 CFR Parts 392, 395, and 396);
- (7) Is familiar with and will have in place on the appropriate effective date, a system for complying with U.S. DOT regulations governing alcohol and controlled substances testing requirements (49 CFR Part 382 and 49 CFR Part 40).

YES NO

EXEMPT APPLICANTS.

If you will operate only small vehicles (GVWR under 10,000 pounds) and will not transport hazardous materials, you are exempt from FMCSRs, and must certify as follows:

Applicant is familiar with and will observe general operational safety guidelines, as well as any applicable State and local laws and requirements relating to the safe operation of commercial motor vehicles and the safe transportation of hazardous materials.

YES NO

SECTION V Compliance Certification

All Motor Passenger Carrier applicants must certify as follows:

Applicant is fit, willing, and able to provide the proposed operations and to comply with all pertinent statutory and regulatory requirements, including the U.S. Department of Transportation's Americans with Disabilities Act regulations for the over-the-road bus companies located at 49 CFR Part 37, Subpart H, if applicable.

YES NO

Private entities that are primarily in the business of transporting people, whose operations affect commerce, and that transport passengers in an over-the-road bus (defined as a bus characterized by an elevated passenger deck over a baggage compartment) are subject to the U.S. Department of Transportation's Americans with Disabilities Act regulations, located at 49 CFR Part 37, Subpart H. For a general overview of these regulations, go to the Federal Motor Carrier Safety Administration's website at www.fmcsa.dot.gov.

SECTION VI Government Funding Status

Specify the nature of governmental financial assistance you receive, if any, by selecting the appropriate box below. Select only one.

- Public recipient** - Applicant is any of the following: any state; any municipality or other political subdivision of a state; any public agency or instrumentality of such entities of one or more state(s); an Indian tribe; and any corporation, board or other person owned or controlled by such entities or owned by, controlled by, or under common control with such a corporation, board, or person which is receiving or has ever received governmental financial assistance for the purchase or operation of any bus.
- Private recipient** - Applicant is not a public recipient but is receiving, or has received in the past, governmental financial assistance in the form of a subsidy for the purchase, lease, or operation of any bus.
- Non-recipient** - Applicant is not receiving, or using equipment acquired with, governmental financial assistance.

Public Interest Criteria: Regular route applicants and private recipient applicants may introduce supplemental evidence describing how the proposed service will respond to existing transportation needs or is otherwise consistent with the public interest. Filing this evidence with the application is optional, but it may be needed later, if the application is protested.

Public Recipient Applicants: All public recipient applicants for charter or special transportation must submit evidence to demonstrate either that:

- (1) No motor common carrier of passengers (other than a motor common carrier of passengers that is a public recipient of governmental assistance) is providing, or is willing and able to provide, the transportation to be authorized by the certificate; or
- (2) The transportation to be authorized by the certificate is to be provided entirely in the area in which the public recipient provides regularly scheduled mass transportation services.

Supplemental evidence should be provided on a separate sheet of paper attached to this application.

Fitness Only Criteria: No additional evidence is needed from non-recipient applicants for charter and special transportation and applicants for contract carrier operations.

SECTION VII Scope of Operating Authority

- (1) **Charter and special transportation**, in interstate or foreign commerce, between points in the United States.
- (2) **Charter and special transportation**, between points in the United States, provided by United States-based enterprises owned or controlled by persons of Mexico.
- (3) Service as a common carrier over **regular routes**. (Regular route passenger carrier authority to perform regularly scheduled service only over named roads or highways.) Regular route passenger service includes authority to transport newspapers, baggage of passengers, express packages, and mail in the same motor vehicle with passengers, or baggage of passengers in a separate motor vehicle.
- (4) Service as a common carrier over **regular routes** provided by United States-based enterprises owned or controlled by persons of Mexico. Applicants requesting authority to operate over regular routes - On a separate sheet of paper attached to the application, describe the specific routes over which you intend to provide regularly scheduled service. You must also furnish a map clearly identifying each regular route involved in your passenger carrier service description(s).
- (5) **Intrastate authority**
- (a) Are you also requesting **intrastate authority** to provide the service described in item 3?
YES NO
- (b) Do you already hold **interstate authority** to provide the service described above?
YES NO
- (c) If you responded "YES" to 5(b) (i.e., if you already hold interstate authority to provide this service), was the authority issued on or before November 19, 1982?
YES NO

If you responded "YES" to 5(c), you must attach to your application a copy of the interstate authority or authorities issued on or before November 19, 1982, authorizing the transportation of passengers on the routes over which you request intrastate authority. You must mark the envelope and the application in the upper right corner of the front page "90-Day Intrastate Passenger Application."

NOTE: The FMCSA has no jurisdiction to grant intrastate authority independently of interstate authority on the same routes. Also, no carrier may conduct operations under a certificate authorizing intrastate regular route service unless it actually is conducting substantial operations in interstate commerce over the same route.

- (6) Service as a **contract carrier** between points in the United States, under continuing contract(s) with persons or organizations requiring passenger transportation service;
- OR
- Service as a **contract carrier** between points in the United States, under continuing contract(s) with:

Contracting persons or organizations

As a **contract carrier**, I will: (Check the box(es) indicating how you will meet the statutory requirements for contract carriage.)

- (a) Furnish the transportation service through the assignment of motor vehicles for a continuing period of time for the exclusive use of each group or organization served;
- (b) Furnish the transportation service designed to meet the distinct needs of each group, organization, or class of groups or organizations. Describe briefly the distinct need(s) below and/or introduce supplemental supporting evidence to identify service needs corresponding to the operations proposed.
- (7) **Alternative Service Descriptions**
- If you request authority that is not covered by items 1-6 above, (i.e., authority to operate in specific territories not identified in the service options previously set forth), describe in the space below.

This service description takes into account the applicant's operational capacity, is responsive to applicant's present and prospective service interest, is not unduly restrictive, and is consistent with the purposes of the Interstate Commerce Act. Certify by checking:

YES NO

SECTION VIII Affiliations

Disclose any relationship you have or have had with any other FMCSA-regulated entity (including entities licensed by the FHWA, OMCS, or ICC) within the past 3 years. For example, this could be through a percentage of stock ownership, a loan, or a management position. If this requirement applies to you, provide the name of the company, MC/FF Number, USDOT Number, and that company's latest DOT safety rating. If you require more space, attach the information to this application form.

SECTION IX Applicant's Oath

This oath applies to all supplemental filings to this application. The signature must be that of applicant, not legal representative.

I, _____, verify under penalty of perjury, under the laws of the United States of America,
(Print Name)

that all information supplied on this form or relating to this application is true and correct. Further, I certify that I am qualified and authorized to file this application. I know that willful misstatements or omissions of material facts constitute Federal criminal violations punishable under 18 U.S.C. 1001 by imprisonment up to 5 years and fines up to \$10,000 for each offense. Additionally, these misstatements are punishable as perjury under 18 U.S.C. 1621, which provides for fines up to \$2,000 or imprisonment up to 5 years for each offense.

I further certify under penalty of perjury, under the laws of the United States, that I have not been convicted, after September 1, 1989, of any Federal or State offense involving the distribution or possession of a controlled substance, or that if I have been so convicted, I am not ineligible to receive Federal benefits, either by court order or operation of law, pursuant to Section 5301 of the Anti-Drug Abuse Act of 1988 (21 U.S.C. 862).

Signature _____ Title _____ Date _____

Form OP-1(P)

Payment Instructions

1) Each type of Operating Authority requested in Section II of the application form requires a \$300 processing fee.

Calculate the total amount due as follows:

$$\begin{array}{c} \text{_____} \\ \text{(Enter total number of boxes} \\ \text{checked in Section II)} \end{array} \times \$300 = \$ \begin{array}{c} \text{_____} \\ \text{(Enter total payment amount)} \end{array}$$

2) Select payment method:

Check or Money Order - Make payable to **FMCSA** in United States (U.S.) currency.
Payment must be drawn upon funds deposited in a bank located in the U.S.

Credit Card - Complete the **Credit Card Payment Authorization** below.

Credit Card Payment Authorization		
Select Credit Card <div style="display: flex; justify-content: space-around; margin-top: 5px;"> _____ Visa _____ _____ MasterCard _____ </div>	Total Payment Amount	
Credit Card #	Expiration Date	
Name (exactly as it appears on credit card)		
Credit Card Billing Address		
Street Name and Number		
City	State	Zip Code
Signature	Date	

Mailing Instructions (To apply online, please see "How to Apply" (Topic II) in this packet.)

1) Save a copy of the completed application form(s), all supporting documents (if any), and payment details for the company's business records.
2) Depending upon the type of payment and method of mail delivery, send the completed application form(s), any supporting documents, and payment to one of the following addresses (NOTE: Sending payment to the wrong address will delay application processing by 2-3 weeks since the payment must be routed to the correct payment address):

- **Check or Money Order**

- **Standard First-Class Mail**

Federal Motor Carrier Safety Administration
P.O. Box 70935
Charlotte, NC 28272-0935

- **Express Mail Only**

QLP Wholesale Lockbox – NC0810
Lockbox #70935
1525 West WT Harris Blvd.
Charlotte, NC 28262

- **Credit Card**

Federal Motor Carrier Safety Administration
1200 New Jersey Avenue SE, MC-RIO
Washington, DC 20590