

 <p><b>U.S. Department Of Transportation</b></p> <p>Federal Motor Carrier Safety Administration</p>	<p>FMCSA REGISTRATION/UPDATE(S) (Application for USDOT Number/Operating Authority) <b>INSTRUCTIONS</b> <b>FORM MCSA-1</b></p>
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**NOTE: Mexico-domiciled motor carriers that operate, or seek authority to operate, beyond United States municipalities on the United States-Mexico border and their commercial zones should not complete this form. They must complete Forms OP-1(MX) and MCS-150.**

## WHO MUST FILE

This form must be filed electronically by all for-hire motor carriers, private motor carriers operating commercial motor vehicles (CMVs), brokers, freight forwarders, cargo tank facilities, and intermodal equipment providers operating in interstate or foreign commerce. All supplemental documents should be scanned and uploaded along with your application. A new applicant must file the Form MCSA-1 before beginning operations. All applicants must update all information using this form.

The following entities must register using this form if they engage in interstate commerce as defined in 49 CFR 390.5:

- For-hire motor carriers of property and passengers domiciled in the United States, Canada, and outside of North America.
- For-hire Mexico-domiciled motor carriers of property and household goods and Mexico-domiciled private motor carriers that seek to operate exclusively within U.S. municipalities on the United States-Mexico Border and their commercial zones. Under North American Free Trade Agreement (NAFTA) Annex I, page I-U-20, a Mexico-domiciled carrier may not provide point-to-point transportation services, including express delivery services, within the United States for goods other than international cargo.
- U.S.-based motor carriers owned or controlled by Mexican nationals transporting passengers and/or international cargo (goods originating or terminating in a foreign country).
- Private motor carriers (except Mexico-domiciled private carriers operating beyond the border commercial zones).
- Property brokers of general freight and/or household goods.
- Freight forwarders of general freight and/or household goods.
- Intermodal equipment providers.
- Cargo Tank Facilities

## **REASONS TO FILE**

1. NEW REGISTRATION –TO REGISTER FOR THE FIRST TIME
2. REINSTATEMENT—TO RETURN A PRIOR REGISTRATION TO GOOD STANDING
3. NEW ENTRANT REAPPLICATION—TO REAPPLY AFTER NEW ENTRANT REGISTRATION HAS BEEN REVOKED (REAPPLY AFTER 30 DAYS)
4. BIENNIAL UPDATE –TO FILE THE UPDATE REQUIRED EVERY 24 MONTHS
5. NAME / ADDRESS CHANGE/FORM OF BUSINESS—TO FILE A CHANGE TO COMPANY’S NAME OR ADDRESS
6. OTHER UPDATE(S)– TO FILE OTHER MISCELLANEOUS CHANGES

**FOR EACH REASON FOR FILING, COMPLETE THE APPROPRIATE SECTIONS OF THE FORM MCSA-1 AS SHOWN IN THE TABLE ON PAGE 1 OF THE FORM**

## **HOW TO FILE**

An applicant must complete Form MCSA-1 and any attachments or statements in English and submit the completed material to FMCSA by filing online at the FMCSA Web site ([www.fmcsa.dot.gov](http://www.fmcsa.dot.gov)).

## **COST TO FILE**

See Section O titled, “Filing Fee Information,” of the Form MCSA-1 application.

## **TELEPHONE ASSISTANCE**

For additional assistance, or to obtain information regarding the status of an application, consult the FMCSA Web site, ([www.fmcsa.dot.gov](http://www.fmcsa.dot.gov)), call FMCSA Support Services at (800) 832-5660, or contact FMCSA Headquarters or State Division offices (See “Contacting Us” on the FMCSA Web site).

**APPLICANTS SHOULD CONSULT THESE INSTRUCTIONS AS THEY COMPLETE THE FORM MCSA-1**

## AN OVERVIEW OF THE SIX REASONS FOR FILING THE FORM MCSA-1

**THIS SECTION PROVIDES GENERAL INFORMATION ABOUT THE SIX REASONS FOR FILING FORM MCSA-1. LINE-BY-LINE INSTRUCTIONS BEGIN ON PAGE 5.**

### **1. NEW REGISTRATION**

**There is a \$300 fee for this transaction.**

Check the “New Registration” box if registering for the first time.

**In addition to completing this form, certain new applicants also must complete the additional requirements described below:**

- ***Financial Responsibility:*** New for-hire (both exempt and non-exempt) motor carriers of property and passengers, property brokers, freight forwarders and private carriers of hazardous materials must also demonstrate minimum financial responsibility for bodily injury and property damage (49 CFR part 387). **Applicants may not begin to operate until the required documents have been filed with, and approved by, FMCSA and an active\* U.S. DOT Number has been issued.**
  
- ***Household Goods:*** New for-hire motor carriers of household goods and freight forwarders of household goods must comply with the minimum cargo insurance requirements as provided in 49 CFR part 387. **Operations may not begin until evidence of compliance with the minimum cargo insurance requirements has been filed with, and approved by, FMCSA and an active\* U.S. DOT Number has been issued.**
  
- ***Designation of Agents for Service of Process:*** New applicants must submit a signed and dated Form BOC-3 titled, “Designation of Agents–Motor Carriers, Brokers and Freight Forwarders.” It must include the street addresses (**not the post office box number**) of designated agents for service of legal process and administrative notices in connection with the enforcement of applicable Federal statutes or regulations. A person must be designated in each State in which the applicant expects to operate, even if it merely passes through the State. If the applicant chooses to use a Process Agent Service, a letter must be submitted with the completed Form MCSA-1 informing the FMCSA of this decision. Applicants must ensure that the Process Agent Service files the BOC-3 with FMCSA within 90 days of the date the Form MCSA-1 is filed. **An applicant may not operate until the BOC-3 has been filed with, and approved by, FMCSA and an active\* U.S. DOT Number has been issued.**

\* A U.S. DOT Number becomes active only after process agent and applicable financial responsibility filings have been completed and approved by FMCSA.

**Certifications and Oaths.** Applicants must sign electronically the completed certification statements and oaths, as follows:

<b>ENTITY</b>	<b>PARTY WHO MUST SIGN</b>
Sole proprietorship	Owner
Partnership	One partner
Corporation	An officer (President, Vice President, etc.)

## **2. NEW ENTRANT REAPPLICATION**

### **There is a \$300.00 fee for this transaction.**

A new entrant whose USDOT registration has been revoked and whose operations have been placed out-of-service (OOS) by the FMCSA may file **to re-apply** for U.S. DOT Registration **no sooner than** 30 days after the date of revocation. If the motor carrier failed to schedule a new entrant safety audit, did not appear for a safety audit, or failed a safety audit and did not submit corrective actions, the motor carrier **must** start the process from the beginning. If the motor carrier failed the safety audit, it **must** also demonstrate that it has corrected the deficiencies that resulted in revocation of its registration.

## **3. REINSTATEMENT**

### **There is a \$10 fee for this transaction.**

Check the “Reinstatement” box to re-apply to reinstate the registration of a motor carrier, freight forwarder, broker, cargo tank facility or intermodal equipment provider that has been inactivated. Please be certain that all the requirements for operation have been met, including those pertaining to filing a process agent designation form and filing evidence of financial responsibility, if applicable.

## **4. BIENNIAL UPDATE**

### **There is no fee for this transaction.**

Check the “Biennial Update” box if the applicant has been issued a USDOT number and is filing a biennial update in accordance with 49 CFR 390.19. The Form MCSA-1 is used for biennial updates every 24 months. A motor carrier that registers its vehicles in a State that participates in the Performance and Registration Information Systems Management (PRISM) program is exempt from the requirements of this section, provided it files all the required information with the appropriate State office.

**Mexico-domiciled motor carriers** holding a “*Certificate of Registration*” from the former Interstate Commerce Commission, the Federal Highway Administration, the former Office of Motor Carrier Safety or the Federal Motor Carrier Safety Administration, that was issued before April 18, 2002, and which designates a territorial scope of operations between points in specified States or between points in the United States, must also file a biennial update in accordance with 49 CFR 390.19.

## 5. NAME/ADDRESS/FORM OF BUSINESS CHANGE

### **There is no fee for this transaction.**

Check the “Name/Address/Form of Business Change” box to file changes to the legal name, doing business as (DBA) name, form of business, or address, provided that there is no change in the ownership, management or control of the entity. The form must be filed within 20 days of the change.

If there is a change in ownership, management or control, a new registration must be filed with FMCSA.

## 6. OTHER UPDATES

### **There is no fee for this transaction.**

Check the “Other Update” box to update registration information, such as vehicle information, driver information, etc.

## LINE-BY-LINE INSTRUCTIONS

- These instructions will assist applicants in completing the Form MCSA-1 accurately. A Form MCSA-1 that does not include all of the required information or contains incorrect information will be rejected by FMCSA and may result in loss of fees.
- The application must be completed in English.
- Applicants should print and retain a copy of the completed Form MCSA-1 and the instructions for their records.

## SECTION A. BUSINESS DESCRIPTION (TO BE COMPLETED BY ALL)

### ***Beginning on Page 2:***

1. **LEGAL BUSINESS NAME.** Provide applicant’s full legal business name – the name of the sole proprietor or partnership, the name of the limited liability company as it appears on the articles of organization, or the complete corporate name as it appears on the incorporation certificate. It is important to spell, punctuate and space accurately the words forming the name of the registered entity. For example, FMCSA regards each of the following as a separate entity: John Jones; Harry L. Jones & John Jones; John Jones Trucking, Inc.
2. **DOING BUSINESS AS NAME (if different from Legal Business Name).** If the applicant uses a trade name that differs from its legal business name as shown in block 1, that name should be entered. Only one trade name, however, is permitted. Example: If the applicant is “John Jones,” doing business as “Quick Way Trucking,” “John Jones” should be entered as the *Legal Name of Business*, and “Quick Way Trucking” should be entered as the *Doing Business As* name. If the applicant does not have a trade name, leave this item blank.
3. **BUSINESS ADDRESS/PRINCIPAL PLACE OF BUSINESS.** Enter the physical address where the principal place of business is located (not the address of a terminal). Use the two-letter postal abbreviation for the State or the abbreviation of

the Canadian Province/Territory. If the applicant is domiciled in Mexico, enter the “Colonia” or “Barrio” where the principal place of business is located. Post office boxes are **not** acceptable.

- 4. MAILING ADDRESS (No P.O. Box).** If the applicant receives mail at an address other than the principal place of business address given, please provide it. This address must include a street name and number and must not be a post office box. If applicant’s mailing address is the same as the principal place of business address, check the box and leave the mailing address blank.

**NOTE:** Applicants must give the Federal Motor Carrier Safety Administration written notice within 20 days of any change in their business or mailing address. They do this by following the directions for “Name/Address/Form of Business Change” and filing the completed Form MCSA-1 with FMCSA. This will ensure that applicants receive notices from FMCSA, and will ensure that documents filed on their behalf are included as part of the applicant’s file. **If a sole proprietor owner/operator provides personal information on the Form MCSA-1, this information will be publically available on FMCSA websites. This published information may include, but is not limited to, the sole proprietor owner/operator’s home address, telephone number and email address when the contact information serves as the business contact information.**

**MEXICO-DOMICILED MOTOR CARRIERS** – If an applicant is a Mexico-domiciled motor carrier and also maintains an office in the United States, that information should also be provided in response to Question 39 of Form MCSA-1.

- 5. COUNTRY OF DOMICILE OF PRINCIPAL PLACE OF BUSINESS.** The applicant should indicate the country in which its principal place of business is located. Check the appropriate box and include the RFC (Registro Federal de Contribuyentes or Federal Taxpayer Registration) number for a company in Mexico or NSC (National Safety Code) number(s) for a company in Canada, as applicable. If applicants have more than one NSC number, you will need to scan and upload the additional information when you file your application.
- 6. PRINCIPAL BUSINESS TELEPHONE NUMBER:** Enter the principal telephone number, including area code, of the principal place of business. Please include the country code if the applicant is not domiciled in the United States.
- 7. PRINCIPAL BUSINESS FAX NUMBER (optional).** Enter the principal fax number, including area code, of the principal place of business. Please include the applicant’s country code if the applicant is not domiciled in the United States.
- 8. PRINCIPAL BUSINESS CELL PHONE NUMBER (optional).** Enter the principal cell phone number, including area code, of the principal place of business. Please include the applicant’s country code if the applicant is not domiciled in the United States.

- 9. USDOT NUMBER (if updating).** Entities that already have been issued a USDOT Number must provide it. Applicants that have not obtained a USDOT Number will be issued one after completion of the registration process. **Applicants must obtain and activate a USDOT Number before beginning operations.**
- 10. MC, MX, and FF NUMBER(S) (if updating).** If the Federal Motor Carrier Safety Administration (FMCSA), the Federal Highway Administration (FHWA), the former Office of Motor Carrier Safety or the Interstate Commerce Commission (ICC) has issued the applicant a Motor Carrier Number (MC-Number), a Mexico-Domiciled Motor Carrier Number (MX-Number), or Freight Forwarder Number (FF-number), please enter all that apply.
- 11. \*IRS TAX ID NUMBER.** Enter the employer identification number (EIN#) assigned to the applicant by the U.S. Internal Revenue Service, or the Social Security Number (SSN #) used to file the applicant's company's tax return with the IRS.  
**Sole proprietor owner/operators are strongly encouraged to obtain an (EIN#) rather than using an (SSN#) when completing the Form MCSA-1.**
- 12. DUN AND BRADSTREET NUMBER.** Enter the business number issued to the applicant by Dun & Bradstreet, if known.
- 13. FORM OF BUSINESS.** Check boxes for all that apply indicating the applicant's form of business:
- Sole Proprietor** – Individuals who operate a business in their own name.
  - Partnership** – Two or more individuals operating as co-owners, for profit.
  - Corporation** – A legal entity created under the laws of a State, owned by shareholders whose liability for corporate debts is limited. Enter State of incorporation.
  - Limited Liability Company** – An entity created under the laws of a State that provides limited liability to its owners, with characteristics of both a corporation and a partnership or sole proprietorship (depending on how many owners there are).
  - Unit of State or Local Government** – An agency, department, commission, bureau, office, or other entity that is in any branch of a State or Local government.
- 14. OWNERSHIP and CONTROL.** Applicants must check the appropriate box regarding citizenship of the owner. The term "citizen" includes a sole proprietor, partner, corporation or limited liability company.
- 15. NAME(S) OF SOLE PROPRIETOR(S), PARTNERS OR OFFICER(S) AND TITLES.** List the names of the owners of the entity. If the applicant is a sole proprietor, please provide the applicant's full name. If the applicant is organized as a partnership, please provide the full names of the general and limited partners. If the applicant is organized as a corporation, please provide the full names of the officers and their respective titles. If the applicant is organized as a limited liability company, please provide the full names of the officers and their respective titles.

**16. REVENUE.** Enter applicant's gross annual operating revenue for the last calendar year. Applicants for registration with no revenue in the past year must enter zero (0). If the applicant earned revenue for only a part of the calendar year, please provide the number of months the applicant operated and the amount of revenue earned for that period.

**17. OPERATION CLASSIFICATION.** Check all the appropriate classifications that apply. If "Other," enter the type of operation in the space provided.

**For-Hire Motor Carrier** – Transportation by a motor carrier for compensation, including:

- o **Property** – Transportation of general freight, hazardous materials or household goods. This category includes transportation exempt from the commercial registration requirements in Title 49 U.S.C. chapter 139. These exemptions can be found in 49 U.S.C. 13506.

- o **Passengers:**

*Charter & special operations* – Charter service is the transportation of groups, assembled by someone other than the carrier, who collectively contract with the bus operator for the use of certain equipment for the duration of a particular trip or tour. Generally, a flat rate is charged. The passengers must travel together for the entire trip. Special operations include almost any type of service that is neither charter nor ordinary regular-route service. It is call-and-demand in nature. The carrier assembles the group through the sale of individual tickets and generally offers some feature in addition to transportation between two points.

*Regular route* – Regularly scheduled service between specific points operated in accordance with a published schedule. Public recipients of governmental financial assistance requesting regular route authority must describe the specific routes over which they intend to provide regularly scheduled service. Public recipients of governmental financial assistance seeking to add new routes after initial registration must file a new application form.

*Limousine/van operations* – Operation of a passenger vehicle usually built on a lengthened automobile chassis designed or used to transport 15 or fewer passengers, including the driver.

*FTA grantee* – A passenger motor carrier providing transportation service within a transit service area under an agreement with a Federal, State, or local government funded, in whole or part, with a grant under 49 U.S.C. 5307, 5310, 5311, 5316 or 5317. Such carriers seek to register to provide for-hire operations between points in a transit service area located in more than one State.



- **Mexico-owned, U.S.-based enterprise** – A U.S.-based company owned or controlled by persons of Mexico. Transportation of property by such an enterprise is limited to international cargo.

**Private Motor Carrier** - Transportation by commercial motor vehicle, not for compensation, as defined in 49 CFR part 390.

- *Property (HM)* – transports any amount of hazardous materials.
- *Property (Non-HM)* – does not transport any hazardous materials.
- *Passengers (Business)* – interstate transportation of passengers provided in the furtherance of a commercial enterprise and not available to the public at large.
- *Passengers (Non-Business)* – interstate transportation of passengers that does not otherwise meet the definition of a private motor carrier of passengers (business) (e.g., church buses).
- *Migrant* – interstate transportation of 3 or more migrant workers to or from their employment by any commercial motor vehicle other than a passenger automobile or station wagon.

**Property Broker** – An entity that arranges for the interstate transportation of cargo belonging to others, using for-hire carriers subject to the commercial registration requirements to provide the actual transportation.

**Freight Forwarder** – An entity that holds itself out to provide the truck transportation of cargo belonging to others, using for-hire carriers subject to the commercial registration requirements to provide the actual interstate transportation. In the ordinary course of business, freight forwarders: (1) assemble and consolidate shipments, (2) conduct break bulk and distribution operations, and (3) assume responsibility for transportation of property from place of receipt to the place of destination. Freight Forwarders may or may not operate trucks.

**Government Entity** – A U.S. Federal Government agency, State Government agency, local Government agency or Indian Tribe.

**Cargo Tank Facility** - An entity that: (1) manufactures, repairs, inspects, tests, qualifies, or maintains a cargo tank to ensure that the cargo tank conforms to 49 CFR part 178, subpart J, and 49 CFR part 180, subpart E; (2) alters the certificate of construction of cargo tank; (3) ensures the continuing qualification of a cargo tank by performing a function prescribed in 49 CFR part 178 or 180; or (4) makes any representation indicating compliance with one or more of the requirements of 49 CFR part 178 or 180.

**Intermodal Equipment Provider (IEP)** - Any person who interchanges intermodal equipment with a motor carrier pursuant to a written interchange agreement or has a contractual responsibility for the maintenance of the intermodal equipment.

**Other** – An entity that transports property or passengers by a classification of operation not described above. Please enter other classification description.

**18. COMPANY CONTACT PERSON.** The person at the applicant’s place of business who prepares the Form MCSA-1 or otherwise assists in completing the application. Provide the contact person’s name, title, position, address, telephone number, fax number, cell phone number (optional) and email address (optional). This individual may be contacted by FMCSA if there are questions concerning this application.

**19. APPLICANT’S REPRESENTATIVE.** If someone other than the applicant prepares the Form MCSA-1, or otherwise assists the applicant in completing the application, provide the representative’s name, title, position, or relationship to the applicant, address, telephone number, and fax number, cell phone number (optional) and email address (optional). This individual may be contacted by FMCSA if there are questions concerning this application.

**20. CERTIFICATION STATEMENT.** This certification is applicable to the representations made by the applicant on the Form MCSA-1. Applicants are certifying to the truthfulness of statements in this form under penalty of perjury.

<p><b>SECTION B. OPERATION CLASSIFICATION</b> <i>(TO BE COMPLETED BY ALL MOTOR CARRIERS, FREIGHT FORWARDERS WITH VEHICLES, AND INTERMODAL EQUIPMENT PROVIDERS)</i></p>
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***Beginning on page 6***

**21. TYPE OF OPERATION.** Check the appropriate type(s) of operation:

***Interstate (Non-HM)*** – Interstate transportation of persons or non-hazardous property across State lines, including international boundaries, or wholly within one State as part of a through movement that originates or terminates in another State or country.

**Interstate (HM)** – Interstate transportation of any amount of hazardous material across State lines, including international boundaries, or wholly within one State as part of a through movement that originates or terminates in another State or country.

**Intrastate (Non-HM)** – Intrastate transportation of persons or property (non-hazardous) wholly within one State that is not part of a through movement that originates or terminates in another State or country.

**Intrastate (HM)** – Intrastate transportation of any amount of hazardous material wholly within the boundaries of a single State that is not part of a through movement that originates or terminates in another State or country.

**22. CARGO.** Check each type of cargo that the applicant will transport or handle. If “Other” is checked, enter the name of the commodity in the space provided.

**23. MILEAGE.** Estimate the miles traveled by applicant’s commercial motor vehicles (CMVs) during the last calendar year. It makes no difference if the CMVs were leased by the applicant or owned by the applicant. Please round the miles to the nearest 10,000 miles. If a new applicant, please enter “0”.

**24. (a) NUMBER OF VEHICLES WITH A GROSS VEHICLE WEIGHT RATING (GVWR), GROSS COMBINATION WEIGHT RATING (GCWR), GROSS VEHICLE WEIGHT (GVW) OR GROSS COMBINATION WEIGHT (GCW) ≥ 10,001 POUNDS THAT WILL BE OPERATING IN THE U.S.** Enter the total number of commercial motor vehicles owned, term-leased or trip-leased that is, or are expected to be, operational on the date the Form MCSA-1 is submitted and have a GVWR, GCWR, GVW or GCW of more than 10,001 pounds.

**If an Intermodal equipment provider,** enter the trailer/chassis-equipment “serviced” and used to interchange with a commercial motor vehicle.

**Passenger vehicles** are defined as:

- o *Motor coach*—a vehicle designed for long distance transportation of passengers, usually equipped with storage racks above the seats and a baggage hold beneath the passenger compartment.
- o *School Bus*—a vehicle designed and/or equipped mainly to carry primary and secondary students to and from school, usually built on a medium or large truck chassis.
- o *Mini-bus*—a motor vehicle designed or used to transport 16 or more passengers, including the driver, and typically built on a small truck chassis. A mini-bus has a smaller seating capacity than a motor coach.
- o *Van*—a small motor vehicle designed or used to transport 15 or fewer passengers, including the driver.

- o *Limousine*—a passenger vehicle usually built on a lengthened automobile chassis designed or used to transport 15 or fewer passengers, including the driver.

**(b) NUMBER OF VEHICLES WITH A GVWR, GCWR, GVW OR GCW ≥ 10,001 POUNDS THAT WILL BE OPERATING IN CANADA OR MEXICO** *(To be completed by US-domiciled motor carriers only)*. Enter the number of commercial motor vehicles that will be operating in Canada or Mexico that have a GVWR, GCWR, GVW or GCW of 10,001 or more pounds.

**(c) NUMBER OF VEHICLES WITH A GVWR, GCWR, GVE OR GCW > 10,001 POUNDS THAT WILL BE OPERATING IN INTERSTATE COMMERCE.** Enter the number of commercial motor vehicles that will be operating interstate that have a GVWR, GCWR, GVW or GCW of 10,001 or more pounds.

**25. (a) NUMBER OF COMMERCIAL DRIVERS WHO WILL BE OPERATING IN THE U.S.** Enter the number of interstate and intrastate drivers used by the applicant on an average workday in the United States. Part-time, casual, term-leased, trip-leased and company drivers should be included. Enter the total number of drivers who have a commercial driver's license (CDL). Enter the number of drivers operating within 100 air miles of the driver's normal work reporting location in each category and the number of drivers operating beyond 100 air miles of the driver's normal work reporting location in each category.

**NOTE:** Any driver who engages in both interstate and intrastate transportation should be counted as an interstate driver.

**Interstate** – The driver transports people or property across State lines, including international boundaries, or wholly within one State as part of a through movement that originates or terminates in another State or country.

**Intrastate** – The driver transports people or property wholly within one State that is not part of a through movement that originates or terminates in another State or country.

**(b) NUMBER OF COMMERCIAL DRIVERS WHO WILL BE OPERATING IN CANADA OR MEXICO.** *(To be completed by US-domiciled motor carriers only)*. Enter the number of interstate drivers used by the applicant on an average workday in Canada or Mexico.

**SECTION C. HAZARDOUS MATERIALS (HM) (TO BE COMPLETED BY HM MOTOR CARRIER/SHIPPERS ONLY)**

***Beginning on Page 8***

- 26. HAZARDOUS MATERIALS CARRIED OR SHIPPED.** If the applicant is (1) a motor carrier of hazardous materials or (2) a motor carrier and shipper of hazardous materials, complete the appropriate section for each type of hazardous materials (HM) the applicant transports and/or ships. In the columns to the left of the category, circle “C” for motor carrier and/or “S” for a shipper. In the columns to the right of the category, circle “B” if the HM is transported in bulk (over 119 gallons) and “NB” if the HM is not transported in bulk (119 gallons or less).

**SECTION D. HAZARDOUS MATERIALS PERMITTING (TO BE COMPLETED BY HM MOTOR CARRIERS ONLY)**

***Beginning on Page 9***

- 27.** Check all boxes that apply indicating the type of hazardous materials your company transports.
- 28.** If you checked a box in question 27, answer questions 28 through 32.
- 33. CERTIFICATION STATEMENT.** To be completed by an authorized official. The authorized person must electronically sign, date and provide his/her title.

**SECTION E. CARGO TANK FACILITY (TO BE COMPLETED BY AN APPLICANT REGISTERING CARGO TANK FACILITIES UNDER 49 CFR PART 107, SUBPART F)**

***Beginning on Page 11***

- A Cargo Tank (CT) Number is required for a company that engages in the manufacture, assembly, inspection, testing, certification (Design Certifying Engineer) or repair of a cargo tank or of a cargo tank motor vehicle.
  - FMCSA will assign a single USDOT Number to the registering company and a unique CT Number for each cargo tank facility registered. All assigned CT Numbers will be associated with the USDOT Number assigned to your company.
- 34.** For each cargo tank facility being registered, please provide the following information:

**Functions.** Check the box corresponding to the description of the specific function to be performed on cargo tanks or cargo tank motor vehicles.

**Exemptions/Special Permits.** For each function checked, list all corresponding exemptions or special permits issued by the Department of Transportation pursuant to

49 U.S.C. 5117.

**Vehicles.** For each function checked, check all boxes corresponding to the types of DOT specification and special permit cargo tanks or cargo tank motor vehicles which the registrant intends to manufacture, assemble, repair, inspect, test or certify. For example, if you will perform “External Visual Inspections,” check all vehicle types indicated in the corresponding row on which the function will be performed. This information is not required for the “Component Manufacture” function.

**Mobile Testing Information.** Check the appropriate box indicating whether the facility uses mobile testing/inspection equipment to perform inspections, tests, or repairs at a location other than the address listed in section A of this application.

**Process Agent.** If the registrant is not a resident of the United States, list the name and address of a permanent resident of the United States designated in accordance with 49 CFR 105.40 to serve as an agent for service of process. A post office box is not a valid address.

**Responsible Person (Facility Location).** Provide the title, position, first and last name, phone number, fax number and e-mail address for the person at the facility location responsible for compliance with the applicable requirements of chapter 1, title 49 Code of Federal Regulations.

**Design Certified Engineers/Registered Inspectors.** Provide the name, address, and type for each registered inspector or design certifying engineer employed by the company to conduct certification, inspection or testing functions.

**Non-Employee Design Certified Engineers/Registered Inspectors.** If the registrant engages non-employees to perform certification, inspection or testing functions, provide the name, address and certification number of each person performing such functions.

**Stamp.** *For each person who manufactures a cargo tank or cargo tank motor vehicle,* provide the stamp type, certification number, authorization date and expiration date of the manufacturer’s current ASME Certificate of Authorization for the use of the ASME “U” Stamp.

*For each person who repairs a cargo tank or cargo tank motor vehicle,* provide the stamp type, certification number, authorization date and expiration date of the repair facility’s current National Board Certificate of Authorization for the use of the “R” stamp or ASME Certificate of Authorization for the use of the ASME “U” Stamp.

**Certification Statement.** The cargo tank certification statement must be completed by the person responsible for compliance with the applicable requirements of chapter 1, title 49, Code of Federal Regulations. Provide the name, title and e-mail address of the certifying official.

**SECTION F. TRANSPORTATION OF HOUSEHOLD GOODS (TO BE COMPLETED BY HOUSEHOLD GOODS MOTOR CARRIERS, HOUSEHOLD GOODS BROKERS, AND HOUSEHOLD GOODS FREIGHT FORWARDERS)**

***Beginning on Page 12***

**35. CERTIFICATION: ARBITRATION AND TARIFF.**

- (1) If the applicant is a for-hire household goods motor carrier (as defined in 49 U.S.C. 13102(12)), the applicant must certify that it participates in a program offering arbitration as a means of settling loss and damage claims. This is a condition of registration. Also, if the applicant is registering as a motor carrier,

broker or freight forwarder of household goods, applicant must certify it is fit, willing and able to provide the service and comply with all applicable statutory and regulatory requirements.

- (2) Applicants applying for registration as a household goods motor carrier must provide certain information regarding their arbitration program and tariff. They must also certify they are familiar with FMCSA's consumer protection requirements applicable to household goods transportation.
- (3) Applicants must disclose all relationships involving common stock, common ownership, common management, or common familial relationships between the applicant and any other motor carrier, freight forwarder, or broker of household goods within 3 years of the date of the filing of this application. The signature should be that of the company official who completes the Applicant's Oath.

**SECTION G. PASSENGER CARRIERS – (TO BE COMPLETED BY PASSENGER CARRIERS)**

*Beginning on Page 14*

**36. GOVERNMENT FUNDING STATUS.** Specify the nature of governmental financial assistance you receive, if any, by checking the appropriate box (Check only one box).

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

**37. PASSENGER CARRIER COMPLIANCE CERTIFICATION** – Applicants transporting passengers must certify that they are fit, willing and able to comply with all applicable statutory and regulatory requirements.

**SECTION H. SCOPE OF AUTHORITY – (TO BE COMPLETED BY PASSENGER CARRIERS)**

*Beginning on Page 15*

**38.** 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 A- Operation Classification" of this application.

**NOTE:**

- "Regular Routes" refer only to passenger carriers that provide scheduled service over regular routes and, in the case of public recipients of governmental assistance, operate over named roads or highways between designated points.
- Passenger carriers engaged in charter and special operations do not provide scheduled service over regular routes.

- Public recipients of governmental assistance that request operating authority over regular routes must submit a detailed narrative description of the route(s) and a corresponding map that graphically displays the route(s) that must be scanned and uploaded along with the application.

**SECTION I. COMMERCIAL ZONE OPERATIONS (TO BE COMPLETED BY MEXICO-DOMICILED MOTOR CARRIERS OPERATING EXCLUSIVELY WITHIN COMMERCIAL ZONES)**

*Beginning on Page 16*

- 39. SCOPE OF REGISTRATION.** If applicant is domiciled in Mexico, please check the appropriate box.
- 40. UNITED STATES ADDRESS.** If applicant maintains an office within the continental United States, please provide the complete address, telephone number and fax number.

**SECTION J. NON-NORTH AMERICA-DOMICILED CARRIERS (TO BE COMPLETED BY MOTOR CARRIERS NOT DOMICILED IN THE UNITED STATES, MEXICO OR CANADA)**

*Bottom of page 16*

- 41. SCOPE OF REGISTRATION.** If applicant is domiciled in a Non-North American country, please check the appropriate box.
- 42. PRINCIPAL BORDER CROSSING POINTS.** Applicant must indicate the principal border crossing points, including the city and State, that it intends to use.
- 43. UNITED STATES ADDRESS.** If applicant maintains an office within the continental United States, please provide the complete address, telephone number and fax number.

**SECTION K. ADDITIONAL INFORMATION (TO BE COMPLETED BY FOR-HIRE MOTOR CARRIERS AND PRIVATE HAZARDOUS MATERIALS CARRIERS, INCLUDING THOSE DOMICILED IN MEXICO AND OUTSIDE OF NORTH AMERICA, AND BY BROKERS AND FREIGHT FORWARDERS)**

*Beginning on Page 18*

- 44. FINANCIAL RESPONSIBILITY.** For-hire motor carriers of property and passengers (both exempt and non-exempt), property brokers, freight forwarders and private carriers of hazardous materials must comply with requirements for demonstrating minimum financial responsibility for bodily injury and property



damage (49 CFR part 387) and submit evidence of financial responsibility to FMCSA. Check each box that describes the type of business the applicant will be conducting. Applicant must contact its insurance company and ensure that it submits the required information in a timely manner.

Motor carriers of property and passengers and freight forwarders, in lieu of filing evidence of commercial insurance may also apply for self-insurance authorization on FMCSA prescribed form BMC-40, or have active authority to self-insure its bodily injury and property damage and/or cargo liability in accordance with 49 U.S.C. 13906, 31138 and 31139.

If applicant is domiciled in Mexico and has been issued a Certificate of Registration, the following must be carried on each of applicant's motor vehicles when they cross the border:

- A current Form MCS-90 indicating insurance coverage for 24 hours or longer.
- The Certificate of Registration.
- An insurance identification card, binder, or other document issued by an authorized insurer which specifies both the effective date and the expiration date of the insurance coverage.

## FINANCIAL RESPONSIBILITY: MINIMUM COVERAGE

<b>PASSENGER CARRIERS</b>		
Seating Capacity	Amount	
Any vehicle with a seating capacity of 16 or more passengers, including the driver	\$5,000,000	
Any vehicle with a seating capacity of 15 or fewer passengers, including the driver	\$1,500,000	
<b>Certain FTA Grantees:</b>		
<p><b>NOTE:</b> The above requirements do not apply to entities providing transportation service within a transit service area under an agreement with a Federal, State, or local government funded, in whole or in part, with a grant under 49 U.S.C. 5307, 5310, or 5311, including transportation designed and carried out to meet the special needs of elderly individuals and individuals with disabilities. In any case in which the transit service area is located in more than one State, the minimum level of financial responsibility for such motor vehicle will be at least the highest level required for any of such States.</p>		
<b>MOTOR PROPERTY CARRIERS AND FREIGHT FORWARDERS OPERATING MOTOR VEHICLES</b>		
<b>Bodily Injury and Property Damage Liability Requirements</b>		
KIND OF EQUIPMENT	COMMODITY	AMOUNT OF COVERAGE REQUIRED
Freight vehicles under 10,001 pounds (4536 kilograms) or GVWR	Property (non-hazardous).	\$300,000
Freight vehicles of 10,001 pounds (4536 kilograms) or more GVWR	Property (non-hazardous).	\$750,000
Freight vehicles of 10,001 (4536 kilograms) pounds or more GVWR	Hazardous substances, as defined in 49 CFR § 171.8, transported in cargo tanks, portable tanks, or hopper-type vehicles with capacities in excess of 3,500 water gallons, or in bulk Class A or B explosives, poison gas, (Poison A), liquefied compressed gas or compressed gas, or highway route controlled quantity or radioactive materials as defined in 49 CFR 173.455.	\$5,000,000
Freight vehicles of 10,001 pounds (4536 kilograms) or more GVWR	Oil listed in § 172.101; hazardous waste, hazardous materials and hazardous substances defined in 49 CFR 171.8 and listed in § 172.101, but not mentioned in (b) above or (d) below.	\$1,000,000
Freight vehicles under 10,001 (4536 kilograms) pounds GVWR	Any quantity of Divisions 1.1, 1.2, or 1.3 material; any quantity of Division 2.3, Hazard Zone A, or Division 6.1, Packing Group I, Hazard Zone A material; or highway route controlled quantities of a Class 7 material as defined in 49 CFR 173.403.	\$5,000,000
<b>Cargo Insurance Requirements</b>		
Motor carriers and freight forwarders of household goods	\$5,000 for loss of or damage to property carried on any one vehicle and \$10,000 for the aggregate losses or damages occurring at any one time or place	
<b>PROPERTY BROKERS</b>		
A property broker must have a surety bond or trust fund in effect for at least \$10,000		
<b>SELF INSURED</b>		
Approval by FMCSA to self-insure in accordance with 49 U.S.C. 13906, 31138 and 31139 and regulations implementing these statutory provisions.		
<b>MOTOR CARRIERS DOMICILED IN MEXICO</b>		
These carriers must carry the same amount of insurance coverage as U.S.-based motor carriers; however, they do <u>not</u> need to file evidence of insurance with FMCSA. These carriers must carry in each of their vehicles when crossing into the U.S. a Form MCS-90 and acceptable evidence of required bodily injury and property damage insurance to cover the carrier's operation during the time it is in the United States.		

**45. AFFILIATIONS.** Applicants must disclose certain information concerning relationships and affiliations with other entities registered with FMCSA (or its predecessor agencies). Applicants must indicate whether these entities have ever been disqualified from operating commercial motor vehicles in the United States pursuant to Section 219 of the Motor Carrier Safety Improvement Act of 1999 (MCSIA) (P. L. 106-159, December 9, 1999).

**46. DESIGNATION OF AGENTS FOR SERVICE OF PROCESS.** All applicants must designate a process agent in each State where operations are conducted. For example, if applicant will operate only in commercial zones along the U.S./Mexico border that are located in California and Arizona, applicants must designate an agent in each of those States; if applicants will operate only in one State, an agent must be designated in that State. **Applicants may not begin operations until the Form BOC-3 has been filed with the FMCSA.**

**SECTION L. SAFETY CERTIFICATIONS (TO BE COMPLETED BY MEXICO-DOMICILED AND NON-NORTH AMERICA-DOMICILED MOTOR CARRIERS)**

*Beginning on page 21*

**47. COMPLETE ALL SAFETY CERTIFICATIONS.**

Mexico-domiciled and Non-North America-domiciled carriers must complete all applicable questions and attachments.

**SECTION M. COMPLIANCE CERTIFICATIONS (TO BE COMPLETED BY MOTOR CARRIERS, BROKERS, AND FREIGHT FORWARDERS)**

*Beginning on page 24*

**48.** Check the applicable box in response to each of questions 1 through 7. Read the certification statement carefully.

**SECTION N. APPLICANT'S OATH (TO BE COMPLETED BY APPLICANT'S AUTHORIZED OFFICIAL)**

***On Page 25***

**49.** 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 applicant. 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 corporate officer
- An individual with power of attorney to act on behalf of the applicant (proof of the power of attorney must be uploaded and submitted with the application)

**SECTION O. FILING FEE INFORMATION (FMCSA DOES NOT REFUND FILING FEES)**

***Beginning on Page 26***

**50.** Enter the type of filing. If this is a New Registration, enter all the entity types for which the applicant is registering. If applicants apply to register as more than one of the following classifications (motor carrier, freight forwarder, broker, intermodal equipment provider or cargo tank facility) the applicant must tender \$300 for each.

Indicate how the applicant intends to pay. Not all transactions require a fee.

**ATTACHMENTS TO SECTION L**

***Beginning on Page 27***

If applicants are motor carriers domiciled in Mexico or outside of North America, they are required to complete Attachments A – D and F. If such applicants transport hazardous materials, they should also complete Attachment E.

**OTHER CONSIDERATIONS** – Before beginning operation, an applicant may be responsible for complying with other laws, such as State registration requirements and payment of fuel taxes.