⊘FTA | United States Department of Transportation
Federal Transit Administration

FTA Charter Registration

Private Charter Operator Registration	Submit New	Search Existing	Qualified Human Service Registration	Submit New	Search Existing

New Private Charter Operator Registration

* = Required

Business Information

Company Name: *

Doing Business As (D/B/A):

Address: * Street: _____ City: _____

State: --Select-- ▾ Zip Code: _____

Phone: * ____ - ____ - ____ **Fax:** * ____ - ____ - ____

Primary Email Address: *
An email address with multiple recipients is preferred

Web Address:
Include http:// or https:// at beginning of URL

Federal or State Motor Carrier Identifying Number: *
The data field is not your tax ID

Number of Vehicles Owned: * Buses: ____ Vans: ____

I hereby certify that my business has valid insurance coverage for areas that I provide charter service to and for those areas that I intend to provide charter service to. * ☐

Willing to provide free or reduced rates to Qualified Human Service Organizations? ☐

Geographic Service Area (select your service areas; at least one area is required)

List of States and Cities
previously added:

None

Specify one state at a time with the applicable cities:

Select State:	--Select-- ∨

Provide service for entire state? ⬜

City: | AARONSBURG
(Hold CTRL for multiple selections) | ABBEVILLE ∧
| ABBOT
| ABBOTSFORD
| ABBOTT
| ABBOTTSTOWN
| ABBYVILLE
| ABELL
| ABERCROMBIE ∨
| ABERDEEN

Add

- OR -

Are you interested in originating service anywhere in the continental U.S.? ⬜

This information will be automatically mapped to the appropriate zip codes.

Contact Information (For internal use by administrators of the website. This information will not be provided to the public.)

Contact * Name: First Name: [   ]   Last Name: [   ]

Alternative POC Email Address: [   ]

Business * Phone: [   ] - [   ] - [   ]

Submit | **Reset**