

**UNIFIED CARRIER REGISTRATION FORM – UCR-2
VEHICLES OWNED AND OPERATED FOR
THE 12 MONTH PERIOD ENDING June 30, 2015
UCR REGISTRATION YEAR 2016**

(NOTE: This form is provided to assist you in maintaining required information. Carriers may also submit the requested data in electronic format or in a printout attached to this form. Contact your state agency for acceptable data formats.)

SECTION 1. GENERAL INFORMATION				
USDOT Number	MC or MX Number	FF Number	Telephone Number	Fax Number
Legal Name			E-Mail Address	
Doing Business Under The Following Name (DBA)				
Principal Place Of Business Street Address (See Instructions)				
Principal Business City		Principal Business State		Zip Code
Mailing Street Address				
Mailing City		Mailing State		Mailing Zip Code

SECTION 2. CLASSIFICATION – Check All That Apply	
<input type="checkbox"/> Motor Carrier	<input type="checkbox"/> Motor Private Carrier

SECTION 3. VEHICLE LIST

The above described carrier hereby declares that the following vehicles are the total number owned and operated for the 12 month period ending June 30, 2015:

MAKE	MODEL/GVWR/ Number of Passengers	LICENSE PLATE NUMBER/STATE	VIN NUMBER
A: STRAIGHT TRUCKS AND TRACTORS			
B. MOTOR COACHES, SCHOOL BUSES, MINI- BUSES, VANS, AND LIMOUSINES			

Use reverse side if needed.

SECTION 4. CERTIFICATION

I, the undersigned, under penalty for false statement, certify that the above information is true and correct and that I am authorized to execute and file this document on behalf of the applicant. (Penalty provisions subject to the laws of the registration state.)

Name Of Owner Or Authorized Representative (Printed)	Date
Signature	Title

