

Proportional Registration Application Schedule A & C

IRP number	Fleet number	Registration year	Mailing address (when different than business address)			TIN		USDOT number		IFTA number		Jurisdictional Use Only		
IRP account name			City	State	ZIP code	Business type <input type="checkbox"/> Sole proprietor <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> Limited liability co.	Transaction type A – Add vehicle C – Change D – Delete vehicle G – Decrease gross wt. I – Increase gross wt. F – Fleet to fleet J – Adding a jurisdiction R – Renewal	Vehicle type TT – Truck tractor TR – Tractor TK – Truck (single) RT – Road tractor DT – Dump truck BS – Bus L G – Log truck	Type of operation <input type="checkbox"/> Exempt commodity carrier (EX) <input type="checkbox"/> Household goods carrier (HC) <input type="checkbox"/> Private carrier (PC) <input type="checkbox"/> For hire carrier (HH)		Lease verified			
Street address (address must be in base jurisdiction)			Person to contact regarding application						(Area code) Telephone number (Area code) Fax number					Date code
City		State	ZIP code	email address						FHVUT 2290				Initials
										MCS-150				Reg. mos.

Weight group number _____ Units listed on this page (within weight group indicated at left) will be authorized to operate in the jurisdictions indicated with maximum gross (combined gross) weight desired. **Use separate pages for different weight combinations (weight groups).**

AB Alberta	AL Alabama	AR Arkansas	AZ Arizona	BC British Columbia	CA California	CO Colorado	CT Connecticut	DC Dist. of Columbia	DE Delaware	FL Florida	GA Georgia	IA Iowa
ID Idaho	IL Illinois	IN Indiana	KS Kansas	KY Kentucky	LA Louisiana	MA Massachusetts	MB Manitoba	MD Maryland	ME Maine	MI Michigan	MN Minnesota	MO Missouri
MS Mississippi	MT Montana	NB New Brunswick	NC North Carolina	ND North Dakota	NE Nebraska	NF Newfoundland	NH New Hampshire	NJ New Jersey	NM New Mexico	NS Nova Scotia	NV Nevada	NY New York
OH Ohio	OK Oklahoma	ON Ontario	OR Oregon	PA Pennsylvania	PE Prince Edward Island	QC Quebec	RI Rhode Island	SC South Carolina	SD South Dakota	SK Saskatchewan	TN Tennessee	TX Texas
UT Utah	VA Virginia	VT Vermont	WA Washington	WI Wisconsin	WV West Virginia	WY Wyoming						

Vehicle information All shaded areas for jurisdictional use only. List only one vehicle per line. Do not duplicate equipment numbers.

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16*	17*						
Trans. type	Owner equip. number	Vehicle identification number	Year	Make	Type of vehicle	A S E A T S	Fuel	Unladen weight	Declared comb. gross wt.	Purchase price of vehicle	Purchase date (m/d/y)	Lease date (m/d/y)	Owner/lessor (if different from registered)	Lic/Plate or TPO number	US DOT	TIN	MSO	VSIF	Lic. credit	Tap number	Tap date	

*If long term leasing (31 days or more) to a motor carrier, place US DOT number of lessee motor carrier in column 16 and lessee TIN (Taxpayer Identification Number), in column 17. Submit a copy of the lease agreement (front page and signature page).

I am knowledgeable of the federal motor carrier safety regulations (49 CFR 300-399) and hazardous materials regulations (49 CFR 100-185) or compatible state regulations 81.80 RCW and WACs 446-50, -65, 480-12-180, -190.

I certify under penalty of perjury under the laws of the state of Washington that the foregoing is true and correct.

Prorate Section
Department of Licensing
PO Box 9036
Olympia, WA 98507-9036
Phone (360) 664-1858
FAX (360) 570-7829 or (360) 586-5905

By _____ Title _____ Date _____ Place _____ **X** President/Owner

Credit explanation / Deletion code

Proportional registration mileage schedule B

Indicate **Y** yes or **N** no for the jurisdiction with which you desire this fleet to be registered.

Indicate **A** for actual or **E** for estimated miles.

Please explain how miles are estimated:

List mileage in each jurisdiction in which this fleet traveled

Y/N	Jurisdictions	A/E	Mileage	Y/N	Jurisdictions	A/E	Mileage
	AB Alberta				NE Nebraska		
N	AK Alaska				NF Newfoundland and Labrador		
	AL Alabama				NH New Hampshire		
	AR Arkansas				NJ New Jersey		
	AZ Arizona				NM New Mexico		
	BC British Columbia				NS Nova Scotia		
	CA California				NV Nevada		
	CO Colorado - complete CO mileage sheet				NY New York		
	CT Connecticut				OH Ohio		
	DC Dist. of Columbia				OK Oklahoma		
	DE Delaware				ON Ontario		
	FL Florida				OR Oregon		
	GA Georgia				PA Pennsylvania		
	IA Iowa				PE Prince Edward Island		
	ID Idaho				QC Quebec		
	IL Illinois				RI Rhode Island		
	IN Indiana				SC South Carolina		
	KS Kansas				SD South Dakota		
	KY Kentucky				SK Saskatchewan		
	LA Louisiana				TN Tennessee		
	MA Massachusetts				TX Texas		
	MB Manitoba				UT Utah		
	MD Maryland				VA Virginia		
	ME Maine				VT Vermont		
	MI Michigan			Y	WA Washington		
	MN Minnesota				WI Wisconsin		
	MO Missouri				WV West Virginia		
	MS Mississippi				WY Wyoming		
	MT Montana				NT NW Territories		
	NB New Brunswick				YT Yukon		
	NC North Carolina				MX Mexico		
	ND North Dakota				TOTAL fleet miles		

Mileage reporting requirements

- **Mileage figures must reflect fleet operations.**
- If you were previously registered in another IRP jurisdiction and accumulated at least three months of actual miles in the mileage reporting period, you must report those actual miles traveled in each jurisdiction on your Proportional Registration Mileage schedule B.

If you have questions regarding your mileage reporting period, contact the Prorate office at (360) 664-1858.

IRP/PRISM requirements

To prevent any delays, please take the time to carefully review your application using the following checklist:

- Washington registration(s) for newly added vehicles must be attached to application. Make sure they **exactly** match the IRP Account name.
- US DOT and TIN numbers must be provided. If long term leasing to a motor carrier (31 days or more), you must also provide their US DOT and TIN numbers in columns 16 and 17. A copy of the lease agreement must be submitted, (front page and signature page).
- IFTA fuel tax license number must be provided if licensed under IFTA.
- A copy of IRS receipted form #2290 (FHVUT) must be submitted for all vehicles with a gross weight of 55,000 pounds or more.
- IRP Established Place of Business, Residency, Change of Address form
- If this is a **new** account and you currently have a US DOT number, provide an updated copy of the Motor Carrier Identification Report (MCS-150).
- Make sure that you have signed all applications where required.