

MOTOR CARRIER VEHICLE REGISTRATION APPLICATION CHECKLIST

(See Section C, for specific instructions)

- A. General Registration Documentation Requirements Check all that apply
 - 1. MC011 Licensing Application Schedule: A https://dmv.nv.gov/pdfforms/mc011.pdf
 - 2. D MC078 Power of Attorney Form (if a Reporting Service is indicated) https://dmv.nv.gov/pdfforms/mc078.pdf
 - 3. MC003 Vehicle Application: Schedule B https://dmv.nv.gov/pdfforms/mc003.pdf
 - 4. MC076 Registrant / Taxpayer Responsibilities https://dmv.nv.gov/pdfforms/mc076.pdf
 - **Proof of Federal Employer Identification Number (FEIN)**

Note: All corporations and/or limited liability companies (LLCs) or sole proprietorships doing business in Nevada must be registered with the office of the Nevada Secretary of State. Information on registration requirements is available at the following link: <u>http://www.nvsos.gov/index.aspx?page=4</u>

All business entities must obtain a Business License from the Nevada Secretary of State. Information is available using the following link: <u>http://www.nvsos.gov/index.aspx?page=267</u>

5.	Ц	Proof of Ownership and Insurance
		Title (original), or copy (front & back) if perfected Original VIN Inspection (if applicable) Title, (and lease if applicable)
		NV Permanent Insurance Card Image: Proof of Sales Tax (if applicable)
6.		Heavy Vehicle Use Tax (HVUT) Form 2290 (all vehicles with a GVW of 55,000 lbs. or more) http://www.irs.gov/pub/irs-pdf/f2290.pdf (must have stamp from IRS or "e-file" watermark)
7.		Smog Certification (if applicable) https://dmv.nv.gov/emission.htm
8.		RD159 Farmer Rancher Affidavit (If Applicable) https://dmv.nv.gov/pdfforms/vp159.pdf
9.		Copy of Principal's current driver's license

B. IRP Registration Documentation Requirements (In addition to the documents specified in Section A)

- 1. MC006 Mileage and Weight Application: Schedule C https://dmv.nv.gov/pdfforms/mc006.pdf
- **2.** MC078 Power of Attorney Form requirements for IRP Registrations (In Addition to Requirements of A2.)
- **3.** If Consolidation for IFTA purposes is checked on application, include the following:
 - Copies of the non-Nevada Registrations
 - Authorization from the affected IFTA member (Consolidation Letter)
 - Letter of Good Standing from the IFTA Jurisdiction (if applicable)
- 4. MC004 Average per Vehicle Distance https://dmv.nv.gov/pdfforms/mc004.pdf
- 5. MC040 IRP Registration Certification https://dmv.nv.gov/pdfforms/mc040.pdf
- 6. Active DOT # must be provided (if leasing onto another carriers authority, a VIN specific letter from that carrier listing the DOT # as well as a copy of the lease agreement is required)
- 7. Separate Proofs of Residency (Cannot be a wireless bill / Must be a Physical Nevada Address / a "drop box" or "virtual office" is not a proof of residency)

C. Motor Carrier Vehicle Registration Application Checklist Instructions

Section A: General Registration Documentation Requirements:

The "General Registration Documentation Requirements" checklist shall be used by the Motor Carrier Division for all Motor Carrier Vehicle registrations which include 100% Nevada Only and International Registration Plan (IRP).

As appropriate, this checklist may also accompany the "Additional IRP Registration Documentation" checklist for apportioned registrations (Sec B)

For access to listings of all corporations and limited liability companies registered with the Nevada Secretary of State's office please access the following link:

http://nvsos.gov/sosentitysearch/

Section B: Additional IRP Registration Documentation Requirements:

The "Additional IRP Registration Documentation Requirements" checklist shall be used by the Motor Carrier Division when issuing an apportioned registration. This checklist shall also be used to verify the carrier is not relocating from another jurisdiction into Nevada. Carriers relocating to Nevada are not permitted to estimate mileage on their IRP application. If actual mileage from a previous jurisdiction is available it must be used to correctly calculate jurisdictional fees.

Note: All forms are available on Motor Carrier's website: <u>dmv.nv.gov/mcforms.htm</u>

Applicant: please print your full legal name, title, sign, and date.

Printed Full Legal Name and Title

Signature

Date

For Office Use Only

Previous Account Entries (Verify Applicant Has Not Had a Previous Account)

NCORS / TS (Previous Account)

IRP Clearinghouse (Previous Account)

☐ IFTA Clearinghouse (Previous Account)

1) If a previous account is found, reopen the account using the same account number.

2) If the account was from out-of-state, open using a new account number.

By signing in the space provided below, I certify that I have reviewed and verified all of the above documentation.

DMV Employee's Printed Name and/or DMV employee Application ID Number DMV Employee's Signature

Date



ATTENTION IRP CARRIERS

To ensure compliance with Federal Motor Carrier Safety Administration Regulation 390.19, all IRP Carriers must provide a United States Department of Transportation (USDOT) number to the Department of Motor Vehicles for all fleet vehicles.

For information on obtaining a number you must visit the Federal Motor Carrier Safety Administration's website at <u>www.fmcsa.dot.gov</u> or by calling 1 (800) 832-5660 option 1.

Your renewal will not be processed and may be returned if you have not supplied the USDOT number to the Department of Motor Vehicles.



IRP FLEETS

ACCEPTED DOCUMENTS FOR ESTABLISHED PLACE OF BUSINESS AND NEVADA RESIDENCY

Proof of Physical Address

To open an IRP (International Registration Plan) account, you first must meet the Established Place of Business and Residency requirements. You must provide at least three (3) proofs of a physical Nevada address. Documents must show the legal business name, physical address, state the "service address"; and when presenting a utility bill; it should be current.

Applicants must have at least three (3) of the following required proofs to satisfy **IRP The Plan 305 c**. Documents are subject to verification by the Department before they will be accepted. Below is a list of eligible documents to be used for proof of address:

- Principal / owner is a resident of Nevada and has a driver's license issued by Nevada.
- Applicant's federal income tax returns have been filed from an address in Nevada.
- Proof of payment of real estate or personal property taxes to Nevada in applicant's name and address.
- Utility Bills in Nevada in a name of applicant and must show service locations. Wireless service bills are not accepted.

If the applicant cannot provide three (3) forms of proof of residency from above, the list below may be used to meet <u>one</u> (1) of the three (3) proofs required to satisfy **IRP 305 c ix**. However, the list below is not a guarantee of document acceptance. All documents are subject to approval by the Department and must clearly contain a verifiable, physical address to be considered. <u>Other documents not listed, may be considered for address verification, based on supervisor approval.</u>

- Court Documents
- Military Leave & Earnings Statement (LES)
- Mortgage and or Deed Documents
- Paycheck or Paystub that is printed and not handwritten
- Concealed/Carry Permit for a firearm.
- Voter Registration Card showing applicants' name and address.
- Applicant has a vehicle titled in Nevada in their name.

This list does not guarantee acceptance of documents. All documents are subject to approval by the department.



IRS Form 2290

The July 2021 revision of Form 2290 is for the tax period beginning on July 1, 2021, and ending on June 30, 2022. Don't use this revision if you need to file a return for a tax period that began on or before June 30, 2021. To obtain a copy of Form 2290 or any of its prior revisions, as well as separate instructions, visit <u>www.irs.gov/Form2290</u>.

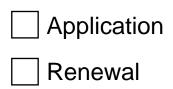


BARBARA K. CEGAVSKE Secretary of State 202 North Carson Street Carson City, Nevada 89701-4201 (775) 684-5708 Website: WWW.NVSOS.gOV

Online application is also available at www.nvsilverflume.gov

USE BLACK INK ONLY - DO NOT HIGHLIGHT

Nevada State Business License Sole Proprietor Registration



PRINT LEGIBLY OR TYPE ALL INFORMATION

Completing this form <u>DOES NOT</u> relieve you of any statutory or regulatory requirements relating to your business. You may be required to complete a Nevada Business Registration form with the Nevada Department of Taxation and Department of Employment, Training and Rehabilitation. Please check with these and other state/local government agencies for additional licensing requirements.

* Asterisks indicate *required* information. Incomplete forms will be rejected.

1. This application is for the use of a sole proprietor doing business in the state of Nevada.

2. If you are exempt from the requirements of the State Business License pursuant to NRS 76.020 **DO NOT** use this form. Please submit a State Business License Exemption form.

3. Return the completed application with the \$200.00 business license fee. Refunds are not available on improperly filed applications.

4. File online at www.nvsilverflume.gov or return the completed form to the Secretary of State by fax to (775) 684-5725; by email to newfilings@sos.nv.gov; or, by mail to 202 North Carson Street, Carson City, Nevada 89701-4201.

5. If paying by check, make your check payable to the Secretary of State. If paying by credit card, you must complete and attach an ePayment Checklist available at www.nvsos.gov in the Forms Library under the Resources section of the Business Center.

6. The sole proprietor applying for the State Business License must sign the application. FORM WILL BE RETURNED IF UNSIGNED.

1*	Signature must be that of the sole proprietor. I declare under penalty of perjury that the information provided is true, correct and complete to the best of my knowledge and belief and acknowledge that pursuant to NRS 239.330, it is a category C felony to knowingly offer any false or forged instrument for filing in the Office of the Secretary of State. I understand that this is the name that will be listed as the sole proprietor on the State Business License.						
	I understand that if I close or cease to expiration date. Failure to do so will r						
	First Name N	Aiddle (Optional)		Last Name		s	uffix
	X						
	Signature of Sole Proprietor Spouse, required only if to be listed o	n license	Date				
	First Name N	/liddle (Optional)		Last Name		s	uffix
	X Signature of Spouse		Date				
<mark>2</mark> *	NV Business ID #	(Required if Renewin	ig - Number o	on State Business License)		
3	You may add up to four businesses assort required by local/county offices.	ciated with this sole p	proprietor. Entries in	nto this section	n <u>do not</u> relieve you of other busin	ess licei	nse or DBA filings
	Business 1. Name(s) 3.			2.			
	3.			4.			
<mark>4</mark> *	Physical Address Physical Street Address	ess			City	State	Zip Code
5	Mailing Address (if different) PO Box or Street Address	dress			City	State	Zip Code
6	Entity Phone ()						
7	Email Address						



INSTRUCTIONS FOR COMPLETING APPLICATIONS

The Licensing Application (Schedule A) and Vehicle Application (Schedule B) provide information regarding your Motor Carrier licensing needs. These forms were designed to provide one application to file for Registration, IFTA Fuel Licensing, Special Mobile Equipment identification and Intrastate Commerce Authority. Use additional pages if needed. You may copy these forms as needed or print them from our website. New accounts must complete both applications. Equipment changes such as: additions, deletions, or changes must be completed on the Vehicle Application – Schedule B.

GENERAL INFORMATION

Registration: these applications can be used for Nevada based IRP registrations and Nevada based intrastate registrations. For further details on IRP registration, please access the following link for the IRP website:

The International Registration Plan (IRP)

For Nevada based intrastate registrations please include the following documents as required:

- Proof of ownership (Dealer Report of Sale (DRS), copy of current registration, title, or the security agreement) in the name of the registrant.
- □ If proof of ownership is an out of state title, an original VIN inspection is required.
- □ If the vehicle is leased, a copy of the lease agreement is required.
- Evidence of Nevada insurance card for all motor vehicles. Must show policy #, beginning and ending date, have VIN or state Fleet Insured and the name on the card must match the registrant name.
- Proof of payment of federal heavy vehicle use tax (HVUT Form 2290) in the form of a copy of the IRS receipted Schedule 1 or a copy of the Schedule 1 with a photocopy of the front and back of the cancelled check for all motor vehicles with a combined gross weight of 55,000 lbs. or greater, regardless of the registered weight. The IRS allows a 60-day grace period from date of sale to obtain the 2290. A copy of the bill of sale will be accepted in lieu of the 2290. The 2290 will be required upon renewal of the registration.

IFTA Fuel Licensing: these applications can be used for Nevada based IFTA registrations. See the IFTA website linked below for further details on IFTA licensing:

International Fuel Tax Agreement (IFTA)

Motor vehicles with a declared gross weight in excess of 26,000 lbs. and leaving the state are required to have an IFTA License and report their activity on a quarterly basis to the Department.

Special Mobile Equipment (SME): this type of equipment is exempt from registration pursuant to Nevada Revised Statute 482.210.1(a). A business entity may apply for identification documents using the Licensing and Vehicle Applications. If the SME equipment is to be used in interstate operations, contact the state(s) in which travel will be conducted to obtain information on registration and/or fuel licensing requirements. The Department will issue IRP and IFTA credentials if required by the foreign jurisdiction.

Intrastate Commerce Authority: The Department is responsible for regulating the activities of common and contract carriers of property other than fully regulated carriers. Applicable statutes can be found in Chapter 706 of the Nevada Revised Statutes. Specific sections include: NRS 706.169, 706.186, 706.291, 706.437, 706.438, 706.439 and 706.4395. General insurance limits are \$750,000 for bodily injury to or the death of one person, \$750,000 for bodily injury to or death of all persons injured or killed in any one accident and \$750,000 (NAC 706.191) for the loss of or damage to the property of others, excluding cargo, in any one accident. Limits are greater for carriers authorized to transport hazardous substances, oil, Class A or Class B explosives, poisonous gas or radioactive materials and can be found listed under Nevada Administrative Code 706.288.

You do not need written authority if any of the following conditions apply:

- > Your vehicles have Apportioned Plates.
- > Your vehicles are used as tow cars (apply to Nevada Transportation Authority).
- You are a fully regulated carrier (apply to Transportation Services Authority). "Fully regulated carrier" means a common carrier or contract carrier of passengers or household goods who is required to obtain from the commission a certificate of public convenience and necessity, or a contract carrier's permit and whose rates, routes and services are subject to regulation by the commission.

Nevada Transportation Authority (NTA) is located 3300 W. Sahara Ave, Suite 200, Las Vegas, NV 89102, PH (702) 486-3303, FAX (702) 486-2590, and website: https://nta.nv.gov/

To obtain written authority, please complete the Licensing Application and send the following documents as applicable:

- Accord/Certificate of Insurance
- Copies of Hazardous Materials Permit if applicable
- U Vehicle ID numbers and Nevada License Plate numbers
- **D** Terminal addresses

LICENSING APPLICATION INSTRUCTIONS: SCHEDULE A

The Licensing Application is separated into three sections. The first section (section A) requests the applicant detail the business information, type of licensing required, type of operation the business maintains, the type of application being submitted and payment option. Section B is specific to general information, while Section C requests additional information regarding the applicant's business operation.

Instructions for completing Section A (Licensing Information):

- 1. Complete the licensing year of the application, business information and licensing information.
- 2. Enter the legal business name as registered with the Secretary of State's office, if incorporated.
- 3. Enter your Motor Carrier Account Number if applicable.
- 4. Enter a Doing Business As (DBA) if used in the State of Nevada if applicable.
- 5. Enter your Federal DOT #, if applicable. A Federal DOT # is required by all motor vehicles in excess of 10,000 lbs. traveling in interstate operations.
- 6. Enter Business License number.
- 7. Enter your Federal Employer Identification Number (FEIN). This number is required by all businesses.
- 8. Check the appropriate boxes under Types of Licensing Required and Type of Operation.
- 9. Enter the names of the Licensing Agent, mailing address, email address and phone number including the area code, is applicable.

Please Note: If using a tax preparation service, please include a notarized Power of Attorney (POA), available on the Motor Carrier forms website at the following link: <u>MC078-Power of Attorney Form</u>

Instructions for completing Section B (General Information):

- 1. Enter the physical address of the business, not a PO Box. For IRP and IFTA credentials, this must be a Nevada address.
- 2. Enter the mailing address of the business if different from the physical address.
- 3. Enter the contact/principal's full legal name and title.
- 4. Enter the e-mail address, phone number and fax number of the contact person including the area codes.

Instructions for completing Section C (Additional Information):

- 1. Indicate whether or not this carrier was previously registered in another jurisdiction.
- 2. Indicate whether you or any corporate officers have held a license under a different name
- 3. Indicate the physical address of where the records for the carrier are maintained.
- 4. Enter the contact principal's name and driver's license number. Enter the e-mail address and phone number of the contact person including the area code. Attach additional sheets if necessary.
- 5. Indicate whether you or any corporate officers have held a license under a different name or FEIN. If "yes," list the FEIN, account number and State.
- 6. Indicate if you maintain bulk fuel storage tanks. If you maintain bulk fuel storage tanks, list the locations and capacity of the tanks. If more space is required, additional locations and tank capacities may also be listed on the back of the application.
- 7. Indicate the number of IFTA qualified motor vehicles registered with the State of Nevada and/or based in other jurisdictions. Indicate if you are consolidating qualified motor vehicles with your Nevada IFTA qualified motor vehicles. You must provide written approval from the other IFTA jurisdiction(s) and copies of all IRP cab cards on qualified motor vehicles being consolidated in Nevada.

VEHICLE APPLICATION INSTRUCTIONS: SCHEDULE B

Enter the Registration start date, Motor Carrier account number, fleet number, legal name, address and check fleet type.

- 1. TRANS CODE = transaction code. Enter the code applicable from the table on the top of the page. (Give a change or deleted reason: lost plate, adding, vehicle no longer in service, etc.)
- 2. NEVADA COUNTY; enter the county where the vehicle is based.
- 3. ZIP CODE #; enter the zip code where the vehicle is based.
- 4. OPERATOR'S VEHICLE #, enter the unit or identification number issued to vehicle by the registrant.
- 5. PLATE #; enter the previous plate number issued to the vehicle if known.
- 6. SERIAL OR VIN #, enter the complete serial number or vehicle identification number (VIN) of the vehicle as listed on the title. This must match the VIN inspection and insurance documents.
- 7. VEHICLE TYPE; enter the code applicable from the table on the top of the page.
- 8. # OF AXLES/SEATS; enter the number of axles on the individual unit. Enter the number of seats for buses.

- 9. # OF COMBINED AXLES.
- 10. UNLADEN WEIGHT; enter the empty weight of the individual unit.
- 11. COMBINED DECLARED GROSS WEIGHT; power units enter the combined or gross weight for which the vehicle will be licensed. Trailer units enter the gross weight carried on the trailer only.
- 12. ODOMETER; enter the current odometer reading for NV only.
- 13. FUEL TYPE; enter the code applicable from the table on the top of the page.
- 14. ACTUAL PUCHASE PRICE; enter the purchase price of the vehicle before trade-in or interest.
- 15. ORIGINAL PURCHASE PRICE OR FACTORY; enter the original purchase cost of the vehicle, if known, or enter the factory or manufacturer's suggested retail price.
- 16. PURCHASE DATE; enter the month, day and year the vehicle was purchased by the registering company.
- 17. MAME OF LESSOR; enter the legal owners name, if different from the registering company.
- 18. USDOT# FOR MCRS; enter the DOT# for Motor Carrier responsible for safety.
- 19. FEIN # FOR MCRS; enter the FEIN# for Motor Carrier responsible for safety.
- 20. WEIGHT EXCEPTION(S); enter Yes or No for Weight Exceptions over 80,000 lbs.



		MOTOR CARRIER B		
-			USINESS	
Sect	ion A: Licensing Information:			LICENSE YEAR: 20
Compa	any Name (Legal Business Name)		Account	t Number
	if used in this state)		Federal	DOT Number
DDA (I			i edelai	
Secret	tary of State - Business License Number		Federal	Employer Identification Number (FEIN)
		1		
Ir	NDICATE TYPES OF ACCOUNTS REQUIRED	INDICATE TYPE OF OPE	RATION	Licensing Agent Service Name:
	00% NEVADA ONLY IRP	PRIVATE FOR HIRE		Licensing Agent Service Mailing Address:
	IFTA	RENT VEHICLES LESS THAT		
	PERMANENT TRAILER (PTL)	 RENT VEHICLES MORE TH WYOMING INTRASTATE AL HOUSEHOLD GOODS 		Licensing Agent Service Email & Phone:
Sect	ion B: General Information:			Note: Licensing Agents must be registered with NV DMV
Physic	cal Address		City	State Zip
Mailing	g Address (If different from the physical)		City	State Zip
Conta	ct Name and Title			
			() ()
	ct E-Mail Address ion C: Additional Information:		Contac	t Telephone Number Contact Fax Number
1.	Was the company previously registered	ed in another iurisdiction? No:	Yes:	If "Yes" where?
2.	Was the company previously registered		=	
3.				
5.	Location of Records (Physical Addres Below please list all financially respon		orporate offic	ers and their titles (attach additional sheets if necessary):
4.			•	
	1)	2	2)	
	Principle Full Legal Name, Title & D	river's License Number		Principle Full Legal Name, Title & Driver's License Number
	Email Address & Phone	e of Principle		Email Address & Phone of Principle
5.	Have you or any of your corporate off	icers or partners ever held a bus	siness license	
5.	or FEIN?			No: 🔄 Yes: 🔄
	If "Yes" list name, FEIN, Account #, ai	nd State:		
6.	Do you maintain bulk fuel storage tan	ks? No: Yes: I	f "Yes" locatio	
				(List additional locations and tank capacities on the back)
7.	Will your company be reporting IFTA that will not be registered under your of	& issuing decals for vehicles company's IRP registration?	No:	Yes:
You m	If yes, please enter the number of nor ust provide written approval from that jurisdiction(s) and of			d in Nevada.
<u>NOTE</u>	Any vehicles with mileage accrued during the route the Appointing Authority or designee.	eporting period and/or registered in and	other jurisdiction	MUST be registered with actual mileage, unless otherwise approved in writing by
comp the N of any	ly with reporting, payment, record keeping ar evada Revised Statutes as applicable. The a y fees due the Department or fuel taxes due t	nd license display requirements as sp pplicant further agrees that the Moto to any member jurisdictions. Failure t	pecified in the Ir r Carrier Division to comply with t	nt's knowledge true, accurate and complete. The applicant agrees to international Fuel Tax Agreement, the International Registration Plan, and on may withhold any refunds due if the applicant is delinquent on payment hese provisions shall be grounds for revocation of license in Nevada and 6.291 and will comply with the Motor Carrier Safety Regulations.
Drinte	d Full Legal Name of Principle and Title	Signature of Princ	inlo	Date
1 111110				Dale

()

Telephone #

E-Mail Address



Vehicle Application: Schedule B

Account #	Fleet #	<u></u>		
Legal Business Name				
Mailing Address				
	Street	City	State	Zip

Fleet Type: IRP / IFTA NV Only Permanent Trailer

Columns 1-10 below must be completed for each line

Registration Start Date: _____

Trans Code	Vehicle Type	Fuel Type
A - Add	TK - Truck	D - Diesel
D - Delete	TR - Tractor	G - Gasoline
C - Change	BS- Bus	P - Propane
T - Transfer	CR - Crane	E - Electric
E - Exchange	ST - Semi Trailer	H - Hybrid
	FT - Full Trailer	O - Other

*MCRS = Motor Carrier Responsible for Safety

*Weight Exceptions: Attach the Schedule C

Line #	1 Trans Code	2 Nevada County	3 Zip Code	4 Unit #	5 Plate #	6 Serial or Vin #	7 Vehicle Type	8 # of Axles/Seats on Vehicle	9 # of Axles on Trailer	10 Unladen Weight
1										
2										
3										

Continued from above: Columns 11-19 below must be completed for each line

Line #	11 Combined Gross Weight	12 Odometer (NV only)	13 Fuel Type	14 Purchase Price	15 Purchase/Lease Date	16 Name of Lessor	17 USDOT # for MCRS	18 FEIN for MCRS	19 Weight Exception(s)
1									Y or N
2									Y or N
3									Y or N

UNDER PENALTIES OF PERJURY, THE APPLICANT DECLARES THAT THE INFORMATION GIVEN IS TO THE BEST OF THE APPLICANT'S KNOWLEDGE TRUE, ACCURATE AND COMPLETE. THE APPLICANT AGREES TO COMPLY WITH REPORTING, PAYMENT, RECORD KEEPING AND LICENSE DISPLAY REQUIREMENTS AS SPECIFIED IN THE INTERNATIONAL FUEL TAX AGREEMENT, THE INTERNATIONAL REGISTRATION PLAN, AND THE NEVADA REVISED STATUTES. THE APPLICANT FURTHER AGREES THAT THE MOTOR CARRIER DIVISION MAY WITHHOLD ANY REFUNDS DUE IF THE APPLICANT IS DELINQUENT ON PAYMENT OF ANY FEES DUE TO THE DEPARTMENT OR FUEL TAXES DUE TO ANY MEMBER JURISDICTIONS. FAILURE TO COMPLY WITH THESE PROVISIONS SHALL BE GROUNDS FOR REVOCATION OF LICENSE IN NEVADA AND ALL MEMBER JURISDICTIONS. THE APPLICANT UNDERSTANDS AND AGREES TO COMPLY WITH THE HAZARDOUS MATERIAL AND MOTOR CARRIER SAFETY REGULATIONS. THE APPLICANT AGREES TO MAINTAIN INSURANCE PURSUANT TO NRS 485.185 AND 706.291 AND WILL COMPLY WITH THE MOTOR CARRIER SAFETY REGULATIONS.

Print Full Legal Name and Title



REGISTRANT / TAXPAYER RESPONSIBILITIES

All Nevada Motor Carrier registrants must complete this document with all new applications and renewals. Failure to do so may result in a delay of processing. All registrants must maintain operational records used to complete the registration renewal and/or IFTA tax return for a minimum of four (4) years from the date the document was submitted. These records must be used to support the total on and off road miles traveled AND fuel purchased for each vehicle in each jurisdiction. Operational records include original source documents such as individual driver's trip sheets with daily odometer readings/routes traveled, summary reports by unit, DOT logbooks and fuel receipts. Records must be suitable for verification of total fleet mileage and fuel purchased as reported on the registrant's renewal and/or quarterly fuel tax returns. Refer to IRP www.irponline.org & IFTA www.iftach.org for additional information. By signing below, the registrant/taxpayer certifies they have read and understand the following:

- Operational records and fuel receipts must be maintained and summarized monthly for each individual vehicle to track all miles traveled, and confirm fuel gallons purchased, even if the vehicle does not leave the State of Nevada. Records must be preserved for four (4) years and include actual odometer readings and routes of travel driven.
- Copies of logbook records may be requested when claiming a fuel tax refund.
- Odometer readings on each vehicle must be documented daily and used to calculate total miles traveled in each jurisdiction. The use of distance software to calculate jurisdictional travel is only acceptable if the routes actually traveled by the unit are used to calculate the total distance and are reconciled back to the odometer prior to filing the renewal or tax return. A hub-odometer must be installed if the vehicle does not have an odometer to provide mileage traveled.
- IFTA fuel tax returns reporting actual miles traveled and total fuel gallons purchased in each jurisdiction are due each quarter. IFTA fuel tax returns submitted by a registrant claiming zero mileage must include an explanation for the zero mileage. (Miles and gallons must be rounded to the nearest whole number.)
- If IFTA fuel tax returns are not filed timely or records are not maintained for four (4) years, fines of up to \$2,500.00 per violation may be assessed.
- IFTA quarterly fuel tax returns are no longer mailed by the Department. The registrant may contact the Motor Carrier Division at the above telephone number or log on to our website at <u>dmv.nv.gov/mcforms.htm</u> to obtain the specified form and current fuel tax matrix for the quarter.
- Refund credit for off-road miles traveled cannot be claimed in some states. Contact those jurisdictions directly for more information. Nevada off road miles must be claimed on form MC45.
- All accounts registered with the Department are subject to audit.
- All carriers based in Nevada must also be registered with the Nevada Secretary of State. Proof of such registration may be required.
- Vehicle license plates, cab card(s), and fuel license(s) must be surrendered to the DMV, Motor Carrier Division, when a vehicle is sold or is non-operational. Failure to return license plates and cab card(s) may result in additional fees due.
 Do not sell your vehicle(s) without removing the credentials first.

Signature of Registrant/Taxpayer (Required)

Date (Required)

Printed Full Legal Name and Title (Required)

Phone (Required)

Motor Carrier Account Number (Required)

E-mail Address (Optional)



IRP REGISTRATION CERTIFICATION

This form must be completed prior to International Registration Plan (IRP) Registration or Renewal. If you answer no to any of the questions below, an explanation must be provided. Please answer the following questions about the physical structure of your business. If this is a home business, please answer about your home.

- Is the physical structure of the "established place of business" located within the base jurisdiction of Nevada owned, leased, or rented by the fleet registrant? A drop box or virtual office does not qualify as an established place of business.
 Yes No
 If no, please explain:
- Does the physical structure have a designated street number or road location?
 Yes No
 If no, please explain:
- Is this location open during normal business hours? (Monday Friday 8 a.m. to 5 p.m.)
 Yes □ No
 If no, please explain:
- Does the location have telephone(s) publicly listed in the name of the fleet registrant, supported by a Nevada telephone company's billing records? (The applicant or registrant need not have land line telephone service)
 Yes
 No
 If no, please explain:
- Is there any person(s) conducting the fleet registrant's business in the location during normal business hours?
 Yes No
 If no, please explain:

6.	Are the operation	onal records of the fleet located at this locat	ion?
	Yes [] No	
	If no, please exp	olain:	

- If not, can the operational records be made available at the Nevada location in the event of an audit?
 Yes
 No
 If no, please explain:
- Note: If not, the registrant must pay all costs of travel and per diem expenses in accordance with the IRP Plan, Section 1602.

The registrant/taxpayer certifies they have read and understand all rules and record keeping requirements. Please visit the following websites:

https://www.iftach.org

Plaase print or type

https://www.irponline.org/default.aspx

https://dmv.nv.gov/mcforms.htm

Under penalties of perjury, the applicant declares that the information given is to the best of the applicant's knowledge, true, accurate and complete. The applicant understands that in the event the established place of business is proven to be outside the State of Nevada, the registrant twill be suspended and fees will not be refunded. The applicant agrees to comply with the Federal Motor Carrier Safety Regulations, reporting, payment, record keeping and license display requirements as specified in the International Fuel Tax Agreement, International Registration Plan, NRS 366, 371, 482 & 706 and NAC 366, 482 & 706. The applicant further agrees that the Motor Carrier Division may withhold any refunds due if the applicant is delinquent on payment of any fees or taxes due the department or any other member justisdiction. The applicant has and will maintain insurance coverage on all motor vehicles per NRS 485,185. Failure to comply with these provisions may be grounds for revocation of fuel license and registration in Nevada and all other member jurisdictions.

Account Number:	Company Name:				
Company Address:					
Signature of Registrant/Taxpayer (Required):	City	State	Zip Code Date:		
Printed Name and Title (Required):					
Phone number (Required):	Email	address (Required):			



State of Nevada Motor Carrier Services Section International Registration Plan (IRP) 555 Wright Way, Carson City, NV 89711-0600

2023 AVERAGE DISTANCE CHART

	JURISDICTION	DISTANCE		JURISDICTION	DISTANCE PER VEHICLE
DE	Delaware	38	ND	North Dakota	1,100
AB	Alberta	293	NE	Nebraska	1,469
AL	Alabama	828	NH	New Hampshire	59
AR	Arkansas	1,170	NJ	New Jersey	297
AZ	Arizona	4,821	NL	Newfoundland-Labrador	1,784
BC	British Columbia	572	NM	New Mexico	2,875
CA	California	8,849	NS	Nova Scotia	328
CO	Colorado	1,354	NV	Nevada	13,114
СТ	Connecticut	257	NY	New York	541
DC	District of Columbia	15	OH	Ohio	1,233
FL	Florida	2,028	OK	Oklahoma	1,667
GΑ	Georgia	1,090	ON	Ontario	57
IA	lowa	875	OR	Oregon	1,648
ID	Idaho	1,287	PA	Pennsylvania	1,132
IL	Illinois	1,131	PE	Prince Edward Island	505
IN	Indiana	999	QC	Quebec	452
KS	Kansas	934	RI	Rhode Island	30
KΥ	Kentucky	484	SC	South Carolina	518
LA	Louisiana	910	SD	South Dakota	575
MA	Massachusetts	251	SK	Saskatchewan	26
MB	Manitoba	295	ΤN	Tennessee	1,255
MD	Maryland	259	TX	Texas	5,867
ME	Maine	202	UT	Utah	4,142
MI	Michigan	213	VA	Virginia	795
MN	Minnesota	758	VT	Vermont	48
MO	Missouri	1,479	WA	Washington	1,105
MS	Mississippi	635	WI	Wisconsin	407
ΜT	Montana	1,102	WV	West Virginia	221
NB	New Brunswick	125	WY	Wyoming	1,391
NC	North Carolina	596			

Distances are based on the sum of actual distance reported during the previous mileage year. These figures are to be used when a registrant does not have an acceptable method to determine anticipated fleet distance.

**The distance is to be calculated times the total number of vehicles in the fleet.



Motor Carrier Division Tax and Licensing Unit 555 Wright Way Carson City, Nevada 89711 (775) 684-4711 Ext 1 MCTLC@DMV.NV.GOV

Online Motor Carrier Access

If you would like to be issued a user ID, please complete the below information and submit to a Motor Carrier office. You may request to have multiple users set up but each will receive a separate user ID and must have a separate email address. Attach additional sheets if necessary.

Third Party Companies must register as Nevada Motor Carrier licensing agencies, access to multiple accounts will not be allowed unless this is completed.

Once the user ID has been created, an email will be sent with the web link and ID. A second email will be sent containing a temporary password.

Account N	ame:		
Account N	umber:	FEIN	Number:
1.	First & Last Name:		
	Phone Number:		
	Email Address:		
	Address:		
	Signature of Requested User:		
	Access Requested:	🗌 IFTA Fuel Tax	
2.	First & Last Name:		
	Phone Number:		
	Email Address:		
	Address:		
	Signature of Requested User:		
	Access Requested:	🗌 IFTA Fuel Tax	□ Registration