



OREGON DEPARTMENT OF TRANSPORTATION
 COMMERCE AND COMPLIANCE DIVISION
 455 AIRPORT ROAD SE BUILDING A
 SALEM OR 97301
 PH (503) 378-6699
 FAX (503) 378-6880

OREGON COMMERCIAL REGISTRATION - MANUFACTURED STRUCTURE TOTERS (FOR OREGON-BASED, INTRASTATE CARRIERS)

DO NOT WRITE IN SPACE ABOVE

CCD ACCOUNT NUMBER	SUB	BUSINESS NAME	EFFECTIVE DATE	
TELEPHONE NUMBER	ADDRESS		CITY	STATE ZIP CODE

VEHICLE TYPE - MANUFACTURED STRUCTURE TOTER

- MOBILE HOME TOTER (MT) - THIS VEHICLE WILL BE USED EXCLUSIVELY TO PULL MOBILE HOMES ON THEIR OWN AXLES.
- ROAD TRACTOR (RT) - THIS VEHICLE WILL BE USED TO PULL MOBILE HOMES PLUS OTHER COMMODITIES.

YEAR	MAKE	COMPLETE VEHICLE IDENTIFICATION NUMBER		ODOMETER	<input type="checkbox"/> HUB <input type="checkbox"/> KM	FUEL	UNIT NUMBER			
BODY	FEE BASIS	<input type="checkbox"/> DEQ (ATTACH CERTIFICATE)	<input type="checkbox"/> HEAVY VEHICLE USE TAX (ATTACH PROOF OF PAYMENT)	<input type="checkbox"/> OWNED	<input type="checkbox"/> LEASED	LESSOR				
REGISTRATION WEIGHT	<input type="checkbox"/> ANNUAL JAN 1-DEC 31	<input type="checkbox"/> 1ST QTR JAN 1-MAR 31	<input type="checkbox"/> 2ND QTR APR 1-JUN 30	<input type="checkbox"/> 3RD QTR JUL 1-SEP 30	<input type="checkbox"/> 4TH QTR OCT 1-DEC 31					
TAX DECLARED WEIGHTS:	SOLO	AXL	COMB #1	AXL	COMB #2	AXL	COMB #3	AXL	COMB #4	AXL
ARE YOU THE MOTOR CARRIER RESPONSIBLE FOR SAFETY?	<input type="checkbox"/> YES <input type="checkbox"/> NO	IF NO, ENTER THE USDOT OF THE CARRIER RESPONSIBLE FOR SAFETY OF THE ABOVE VIN.	ENTER THE TIN/ FEIN ASSIGNED TO THIS USDOT.		WILL THIS CHANGE DURING THE REGISTRATION YEAR?		<input type="checkbox"/> YES <input type="checkbox"/> NO			

OREGON REGISTRATION DISCONTINUED OR CANCELLED	
BASE PLATE NUMBER	VEHICLE IDENTIFICATION NUMBER UNIT NO
<input type="checkbox"/> LEASE TERMINATED <input type="checkbox"/> LOST/STOLEN/DESTROYED <input type="checkbox"/> RETURNED	
IF YOU PARTICIPATE IN A CONTROLLED SUBSTANCE TESTING CONSORTIUM, PROVIDE THE NAME OF THE CONSORTIUM.	
Under Oregon law, it is a crime to knowingly provide false information or certify any information that a person knows to be false related to a vehicle registration (ORS 803.375 and 803.385). Each offense is a Class A misdemeanor and punishable by a jail sentence of up to one year, a fine of up to \$6,250, or both. This certification is true and correct to the best of my knowledge. I am knowledgeable of the applicable federal motor carrier safety regulations, hazardous materials regulations, compatible state regulations, standards and orders. I declare all operations will be conducted in compliance with such requirements.	
SIGNATURE	PRINT NAME
TITLE	DATE

DO NOT WRITE IN SPACE BELOW	
FEES	REG ONLY MLG FM 0 1 2
REGISTRATION	F
PLATE, CAB CARD, STICKER	C
TOTAL PAID	
VEHICLE ACTION	EFFECTIVE DATE
DATE KEYED	KEYED/APPROVED BY

