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

PLEASE TYPE OR PRINT LEGIBLY IN BLACK INK

SIGNATURE ADDENDUM TO MOTOR CARRIER ACCOUNT

MOTOR CARRIER LEGAL NAME AND ADDRESS OF RECORD

CCD ACCOUNT NUMBER	NAME OF CARRIER		
TELEPHONE NUMBER	FAX NUMBER	DOING BUSINESS AS (DBA)	

LIST ALL PARTNERS - ADDENDUM TO APPLICATION FOR MOTOR CARRIER ACCOUNT

PROVIDE FULL LEGAL NAME, TITLE, DATE OF BIRTH, AND SOCIAL SECURITY NUMBER OF ALL PARTNERS IN PARTNERSHIP OR LIMITED LIABILITY PARTNERSHIP.

LAST	FIRST	MIDDLE	TITLE	SOCIAL SECURITY NUMBER	DATE OF BIRTH
LAST	FIRST	MIDDLE	TITLE	SOCIAL SECURITY NUMBER	DATE OF BIRTH
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DISCLOSURE: THE DEPARTMENT IS AUTHORIZED TO VERIFY ANY OF THE INFORMATION GIVEN AND OBTAIN CREDIT REPORTS ON YOU AND/OR YOUR COMPANY. YOU AUTHORIZE THE DEPARTMENT TO OBTAIN INFORMATION FROM OTHERS TO INVESTIGATE YOU AND/OR YOUR COMPANY'S CREDIT.

CERTIFICATION: THIS CERTIFICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. I UNDERSTAND THAT ORS 803.375 MAKES IT A CRIME TO KNOWINGLY PROVIDE FALSE INFORMATION RELATED TO A VEHICLE REGISTRATION. ORS 803.385 MAKES IT A CRIME TO AFFIRM OR CERTIFY ANY INFORMATION RELATED TO A VEHICLE REGISTRATION THAT THE PERSON KNOWS TO BE FALSE. EACH OFFENSE IS A CLASS A MISDEMEANOR AND EACH IS PUNISHABLE BY A JAIL SENTENCE OF UP TO ONE YEAR, A FINE OF UP TO $6,250, OR BOTH.

I FURTHER CERTIFY KNOWLEDGE OF APPLICABLE FEDERAL AND STATE SAFETY RULES, REGULATIONS, STANDARDS AND ORDERS AND DECLARE ALL OPERATIONS WILL BE CONDUCTED IN COMPLIANCE WITH SUCH REQUIREMENTS.

SIGNATURE REQUIREMENTS: MUST BE SIGNED BY OWNER; ALL PARTNERS; CORPORATION OFFICER; MANAGER/MEMBER OF LIMITED LIABILITY COMPANY (LLC), PARTNER IN A LIMITED LIABILITY PARTNERSHIP OR AGENT. FAXED AND ELECTRONIC SIGNATURES ACCEPTABLE.

SIGNATURE	PRINTED NAME	DATE
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DO NOT WRITE BELOW THIS LINE. ODOT USE ONLY

ENTERED BY/OFFICE	DATE

FORM 735-9075a (1-23)

PLEASE MAKE AND RETAIN A COPY FOR YOUR RECORDS