



OREGON DEPARTMENT OF TRANSPORTATION
 COMMERCE AND COMPLIANCE DIVISION
 3930 FAIRVIEW INDUSTRIAL DRIVE SE
 SALEM OR 97302-1166
 PH (503) 378-6699
 FAX (503) 378-6880

OREGON REGISTRATION EXEMPT PLATE APPLICATION

(FOR OREGON-BASED FIRE SUPPRESSION, WELL DRILLING, OR TRIBAL GOVERNMENT OPERATED VEHICLES)

DO NOT WRITE IN SPACE ABOVE

CCD ACCOUNT NUMBER	SUB	BUSINESS NAME	EFFECTIVE DATE
TELEPHONE NUMBER	FAX NUMBER	INCLUDE A FAX NUMBER TO OBTAIN TEMPORARY CREDENTIALS. THE PLATES AND REGISTRATION EXEMPT DOCUMENTS WILL BE MAILED TO THE MAILING ADDRESS ON FILE UNLESS INDICATED.	
ADDRESS		<input type="checkbox"/> ADDRESS CHANGE	CITY
		<input type="checkbox"/> SPECIAL MAIL	STATE
			ZIP CODE

CERTIFY VEHICLE(S) USE:

These vehicles will be used exclusively for fire suppression, well drilling, or by a federally recognized Tribal Government. Exemption from registration fees is based on the use of the vehicle per ORS 803.305.

PLATE NUMBER	YEAR	MAKE	COMPLETE VEHICLE IDENTIFICATION NUMBER				FUEL	UNIT NUMBER/E PLATE NUMBER	VT		
<input type="checkbox"/> OWNED	LESSOR						ODOMETER	<input type="checkbox"/> HUB	<input type="checkbox"/> KM		
<input type="checkbox"/> LEASED											
SOLO	AXL	COMB #1	AXL	COMB #2	AXL	COMB #3	AXL	COMB #4	AXL	FEE BASIS	BODY
<input type="checkbox"/> ADD VEHICLE <input type="checkbox"/> AMEND VEHICLE INFORMATION <input type="checkbox"/> CANCEL VEHICLE <input type="checkbox"/> OTHER _____											

PLATE NUMBER	YEAR	MAKE	COMPLETE VEHICLE IDENTIFICATION NUMBER				FUEL	UNIT NUMBER/E PLATE NUMBER	VT		
<input type="checkbox"/> OWNED	LESSOR						ODOMETER	<input type="checkbox"/> HUB	<input type="checkbox"/> KM		
<input type="checkbox"/> LEASED											
SOLO	AXL	COMB #1	AXL	COMB #2	AXL	COMB #3	AXL	COMB #4	AXL	FEE BASIS	BODY
<input type="checkbox"/> ADD VEHICLE <input type="checkbox"/> AMEND VEHICLE INFORMATION <input type="checkbox"/> CANCEL VEHICLE <input type="checkbox"/> OTHER _____											

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SOLO	AXL	COMB #1	AXL	COMB #2	AXL	COMB #3	AXL	COMB #4	AXL	FEE BASIS	BODY
<input type="checkbox"/> ADD VEHICLE <input type="checkbox"/> AMEND VEHICLE INFORMATION <input type="checkbox"/> CANCEL VEHICLE <input type="checkbox"/> OTHER _____											

PROVIDE NAME OF CONTROLLED SUBSTANCE TESTING CONSORTIUM OR WRITE "IN-HOUSE" IF YOU MAINTAIN YOUR OWN PROGRAM:

CERTIFICATION	
I HEREBY CERTIFY THAT THE STATEMENTS CONTAINED IN THIS APPLICATION ARE TRUE AND CORRECT; NO MATERIAL FACT HAS BEEN OMITTED; THERE IS NOT A PERSON HAVING ANY INTEREST, DIRECTLY OR INDIRECTLY, IN THE OWNERSHIP OF THIS OPERATION EXCEPT AS SPECIFIED ABOVE; AND THAT THE OWNERSHIP AS DESIGNATED WILL AT ALL TIMES HAVE FULL POSSESSION AND CONTROL OF ALL MOTOR VEHICLES OPERATED OR REGISTERED UNDER THIS AUTHORITY.	
SIGNATURE	DATE
PRINT NAME	TITLE

DO NOT WRITE IN SPACE BELOW
EFFECTIVE DATE
PROOFED DATE
PROOFED BY
DATE KEYED
KEYED BY

INSTRUCTIONS

This form is to be completed and filed when applying for: 1) Oregon Registration Exempt Plate(s) for Oregon-Based fire suppression, well drilling, or federally recognized Tribal Government vehicles only; 2) Amended Oregon Registration Exempt Plate(s) for vehicle(s) already on file with ODOT/CCD.

Enter your ACCOUNT NUMBER, BUSINESS NAME, EFFECTIVE DATE, TELEPHONE NUMBER, and complete ADDRESS. If you wish to have Temporary Enrollment Document(s) faxed back to you, include your fax number. If you do not have an account number, this form must be accompanied by an APPLICATION FOR MOTOR CARRIER PERMIT, ODOT FORM 735-9075, available at <https://www.odot.state.or.us/forms/motcarr/reg/9075fill.pdf>.

Certify that vehicle(s) and motor carrier operations qualify for Oregon Registration Exempt Plate(s) by checking the box specifying the vehicle(s) will be used for fire suppression, well drilling, or used by a federally recognized Tribal Government as per ORS 803.305.

VEHICLE REGISTRATION

In order for each power unit to be registered correctly, carriers are required to provide all information requested on this form. PLEASE TYPE OR WRITE CLEARLY. Applications that are illegible, incomplete, or incorrect may result in errors on the registration exempt plates and/or Registration Exempt Document(s) issued. Incorrect Oregon Registration Exempt Plates and Registration Exempt Document(s) may subject a driver to citation and a \$440 fine. A "fillable" version of this form (ready to be completed on-screen and printed on a local printer) is available on the internet at: <https://www.oregon.gov/ODOT/Forms/Motcarr/9959fill.pdf>.

Please provide the COMPLETE vehicle identification number. Tribal vehicles need to include their DMV issued E plate number as the unit number. Use the codes listed below when indicating vehicle type, body style, fuel type, and fee basis.

IMPORTANT NOTE: It is required that the license plate number on Oregon Registration Exempt Plate(s) match the plate(s) that are attached to the vehicle and listed on the Registration Exempt Document.

DECLARED WEIGHTS

Your DECLARED WEIGHTS are subject to audit and approval by ODOT. If your combined weight is in excess of 80,000 lbs., you must obtain an Oregon Over Dimensional Permit.

SOLO - The maximum loaded weight of a single unit (truck) or the weight allowable for a power unit operating with the trailer up (decked). The MINIMUM allowable solo weight (decked) is the declared weight of the combination minus the maximum weight upon the trailer axles.

COMBINATION - The weight of the vehicle plus the weight of the maximum load the vehicle will transport. You must declare more than one combination if you operate different configurations.

VEHICLE AMENDMENT

For each registration exempt vehicle to be corrected, enter the BASE PLATE NUMBER, check the "AMEND VEHICLE" box and list the item being amended.

If a weight declaration is to be changed, list ALL weight declarations under which the vehicle is to be declared for future operations.

DRUG CONSORTIUM

Provide name of drug and alcohol testing consortium in which your company is enrolled or write "in-house" if you maintain your own program. Testing programs must be in compliance with USDOT requirements (49 CFR part 382).

SIGNATURE

The application must be signed by a company representative.

NOTE: You must report the Oregon Highway Use Tax for the operations of all vehicles enrolled in the Oregon Weight-Mile Tax Program under your account, including leased vehicles.

ADDITIONAL INFORMATION MAY BE REQUESTED IN WRITING OR BY CALLING 503-378-6699 OR VISITING

www.oregontruckingonline.com

CODES									
MAKE ABBREVIATIONS				FUEL CODES				BODY STYLE *	
AUTC	FRGH	MACK	STRG	5 - M85	G - GASOLINE	B - BUS	R - VEHICLE CARRIER		
CHEV	GMC	MERC	TMC	8 - E85	H - GASOHOL	C - CHIP TRUCK	S - LIVESTOCK TRUCK		
DIAT	HINO	MCI	VAN	A - A55	L - LIQUID NATURAL GAS	D - DUMP TRUCK	T - TANK		
DODGE	INTL	NISS	WEST	B - BIODIESEL	M - METHANOL	F - FLATBED	V - VAN		
FORD	KW	PREV	WHGM	C - COMPRESSED NATURAL GAS	P - PROPANE	G - GARBAGE TRUCK	WB - WRECKER CLASS B		
IF NOT LISTED, USE FIRST FOUR LETTERS OF NAME.				D - DIESEL	X - HYBRID	H - MOBILE HOME TOTER	WC - WRECKER CLASS C		
				E - ETHANOL	Y - ELECTRIC	K - SELF-LOADING LOGGER	WD - WRECKER CLASS D		
				FEE BASIS CODES				L - SHORT LOGGER OR MULE TRAIN	X - FIXED LOAD, BOOM, CRANE, WELL DRILLER, GRADER, ETC
VEHICLE TYPES						1L - LONG LOGGER	Y - LOWBOY		
BA - BUS ARTICULATED		TK - TRUCK				M - MIXER	Z - OTHER		
BS - PASSENGER BUS		TR - TRACTOR		1 - MONTHLY MILEAGE		* In a combination vehicle, the type of trailer is the body style.			
DT - DUMP TRUCK		TT - TRUCK & TRAILER		2 - FLAT MONTHLY					
HF - HEAVY FIXED		TW - TOW VEHICLE		4 - QUARTERLY MILEAGE					
MT - MOBILE HOME TOTER				5 - ANNUAL MILEAGE					