



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

SEE INSTRUCTIONS ON REVERSE
PLEASE TYPE OR PRINT LEGIBLY IN BLACK INK

APPLICATION FOR MOTOR CARRIER ACCOUNT

TYPE OF APPLICATION

☐ NEW CARRIER ☐ NAME CHANGE ☐ ADDRESS/PHONE/EMAIL CHANGE ☐ ACCOUNT AMENDMENT ☐ OWNERSHIP CHANGE _____
LIST PREVIOUS ACCOUNT NUMBERS

WEIGHT- MILE TAX REPORTING TYPE

☐ **QUARTERLY**, IF YOU ELECT TO REPORT AND PAY WEIGHT-MILE TAX ON A QUARTERLY BASIS.

☐ **MONTHLY**, IF YOU ELECT TO REPORT AND PAY WEIGHT-MILE TAX ON A MONTHLY BASIS.

MOTOR CARRIER LEGAL NAME AND ADDRESS OF RECORD

CCD ACCOUNT NUMBER	NAME OF CARRIER		
TELEPHONE NUMBER	FAX NUMBER	DOING BUSINESS AS (DBA)	
CARRIER MAILING ADDRESS		CITY	STATE ZIP CODE
CARRIER STREET ADDRESS (IF DIFFERENT THAN ABOVE)		CITY	STATE ZIP CODE
RECORDS LOCATION ADDRESS		CITY	STATE ZIP CODE
EMAIL ADDRESS FOR TRUCKING ONLINE	TRUCKING ONLINE CONTACT PERSON		TRUCKING ONLINE CONTACT PHONE

YOU WILL BE SENT A PASSWORD LINK FOR TRUCKING ONLINE ACCESS AT THE EMAIL ABOVE. I UNDERSTAND MY PASSWORD CAN BE USED TO CONDUCT TRANSACTIONS WITH AND TO OBTAIN CREDENTIALS FROM ODOT OVER THE INTERNET. I WILL TAKE STEPS TO PROTECT MY PASSWORD FROM BEING ACCESSED BY UNAUTHORIZED USERS. I FURTHER UNDERSTAND THAT IF I GIVE MY PASSWORD TO ANYONE ELSE, OR IF I AUTHORIZE A POWER OF ATTORNEY TO OBTAIN MY PASSWORD ON MY BEHALF, I AM PERSONALLY LIABLE FOR ANY TRANSACTIONS MADE OR CREDENTIALS OBTAINED BY ANYONE ELSE WHO MAY HAVE RECEIVED MY PASSWORD FOR THE THIRD PARTY TO WHOM I ORIGINALLY DISCLOSED IT. ONLY ONE EMAIL ADDRESS PER ACCOUNT. ONLY ONE PASSWORD IS ALLOWED PER ACCOUNT.

CONSORTIUM NAME ACCOUNTS WITH OREGON-BASED VEHICLES: 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).

TYPE OF OWNERSHIP AND FEDERAL TAXPAYER ID# (FEIN)

☐ INDIVIDUAL ☐ PARTNERSHIP ☐ CORPORATION: DATE OF INCORPORATION: _____ STATE OF INCORPORATION: _____
IF FOREIGN BASED, ATTACH CORPORATE CERTIFICATE SHOWING DATE OF INCORPORATION AND CORPORATE STATUS.
☐ LIMITED LIABILITY COMPANY - ATTACH A COPY OF THE ARTICLES OF ORGANIZATION ☐ OTHER - PROVIDE TYPE OF OWNERSHIP: _____

FEDERAL TAXPAYER ID#	BANKING INSTITUTION	STATE
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TYPE OF OPERATION OR AUTHORITY - CHECK ALL THAT APPLY

☐ PRIVATE CARRIER (NOT FOR HIRE) OREGON BASED	INTERSTATE CARRIER (FOR HIRE)
☐ PRIVATE CARRIER (NOT FOR HIRE) BASED OUTSIDE OREGON	☐ USDOT NUMBER _____
☐ CLASS B FOR-HIRE LOCAL CARTAGE OF HOUSEHOLD GOODS WITHIN DESIGNATED AREAS, PURSUANT TO ORS 825.240. A \$50 APPLICATION FEE IS REQUIRED.	☐ MC AUTHORITY NUMBER _____
☐ 7W (SEE DESCRIPTION ON REVERSE) _____ DESCRIPTION	☐ MC EXEMPT OPERATIONS _____
☐ CLASS 1A PERMIT FOR-HIRE INTRASTATE COMMODITIES (EXCEPT HOUSEHOLD GOODS) (COMPLETE ODOT FORM 735-9745)	OREGON PROCESS AGENT _____ ADDRESS _____

PROVIDE FULL LEGAL NAME, TITLE, DATE OF BIRTH, AND SOCIAL SECURITY NUMBER OF INDIVIDUAL, ALL PARTNERS, CORPORATE OFFICERS, MANAGERS/MEMBERS OF LLC, GENERAL PARTNER OF A LIMITED PARTNERSHIP, PARTNERS IN A LIMITED LIABILITY PARTNERSHIP. IF MORE THAN TWO PARTNERS, ATTACH SIGNATURE ADDENDUM FORM, 735-9075a.

LAST	FIRST	MIDDLE	TITLE	SOCIAL SECURITY NUMBER	DATE OF BIRTH
LAST	FIRST	MIDDLE	TITLE	SOCIAL SECURITY NUMBER	DATE OF BIRTH

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
SIGNATURE	PRINTED NAME	DATE

DO NOT WRITE BELOW THIS LINE. ODOT USE ONLY

ENTERED BY/OFFICE	DATE
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INSTRUCTIONS

This form is to be completed and filed when:

1. **Applying for an established account to operate as a motor carrier in Oregon**
2. **Changing the informational record on file with ODOT.**

TYPE OF APPLICATION

Indicate whether new account or change in existing account.

- A new carrier is a carrier that has had no previous established account in Oregon.
- A name change is when there is an existing account and only the name has changed. The FEIN remains the same.
- An ownership change is a change in entities and/or ownership structure of a company for which there is an existing account. The FEIN has changed.

WEIGHT-MILE TAX REPORTING TYPE

Pursuant to OAR 740-055-015, a motor carrier approved to report and pay weight-mile tax on a quarterly basis may begin such reporting and payment in the first full calendar quarterly reporting period immediately following the month approval is granted by the Department.

1. Select QUARTERLY, to elect to file reports and pay weight-mile tax on a quarterly basis. ODOT requires you to file reports and pay as long as you have Oregon DOT plates and/or vehicle(s) enrolled in the Oregon Weight-Mile Tax Program. If no tax is due, you must still file a report
2. Select MONTHLY, to elect to file reports and pay weight-mile tax on a monthly basis. ODOT requires you to file reports and pay as long as you have Oregon DOT plates and/or vehicle(s) enrolled in the Oregon Weight-Mile Tax Program. If no tax is due, you must still file a report.

NEW AUTHORITY/TYPE OF OPERATION

1. Your name must match exactly the name filed with your state if a corporation or assumed business name.
2. Enter your complete mailing address and telephone number. Your street address must also be entered if it is different than your mailing address, or if you receive your mail through a post office box. This will ensure UPS delivery. If your address of record with ODOT is an agent's address, the power of attorney must specifically authorize the use of the agent's address.
3. Indicate your type of ownership. Oregon corporations, Oregon limited liability companies, limited liability partnerships, and businesses with Oregon mailing addresses using assumed business names must be registered with the Oregon Secretary of State, Corporation Division.
4. A Class B Permit authorizes a carrier to transport household goods for hire within designated local cartage areas that are exempt from economic regulation (see list of cities in OAR 740-060-0100). Pursuant to ORS 825.240, the following conditions must apply: (a) the gross revenue derived from local cartage of household goods in the designated area by carriers cannot exceed \$100,000 a year; (b) the population of the affected city or cartage area is less than 10,000; (c) the incorporated city or cartage area is not an essential part of a metropolitan, industrial or homogeneous economic area; (d) the incorporated city or cartage area is not contiguous to another city or within the area encompassed by the commercial zone of another city; (e) service to the public would be adversely affected; (D the carrier's ability to render service would not be adversely affected; and (g) it is not otherwise adverse to the public interest to exclude such area from regulation.
5. Description of "7W" operations - Permit Authority under ORS 825.020 for operations over 26,000:

U.S. mail on a trip basis
Buses within cities and within three air miles of the city
Vehicles used in preventing or fighting forest fires
Tow trucks
Common or contract carriers transporting employees, relatives, indigents, etc.
Florist delivery vehicles
Private carriers transporting fish
Vehicles owned by truck leasing companies used for purposes of relocation
6. If you wish to haul commodities (except household goods) intrastate, please complete an Application for Class 1A Permit (ODOT Form 735-9745) and include a \$300 application fee.

7. List the full name, title, date of birth, and social security number of the individual owner, each partner, each corporate officer, partners in a limited liability partnership (LLP), or each manager/member of the limited liability company (LLC). If a corporation, attach a list of shareholders, officers or directors not already listed. Attach addendum if needed.
8. The application must be signed by the individual owner, all partners, a corporate officer, a partner in a LLP, a manager/member of the LLC, or Agent. Note to agent: Include your title when signing and attach a power of attorney form.
9. Per OAR 740-040-0070 you will be required to post a Surety Bond regardless of whether you operate on an ODOT plate, temporary pass, or enrolled in the Oregon Weight-Mile Tax Program.
10. When operating intrastate only, you will be required to file proof of liability insurance with ODOT. When operating interstate, review federal regulations regarding the Minimum Levels of Financial Responsibility for Motor Carriers.

For bond, insurance and record keeping requirements, refer to the information available on our website.

<https://www.oregon.gov/ODOT/MCT/Pages/index.aspx>

CHANGE OF INFORMATIONAL RECORD

1. So that you may be accurately identified, enter your account number, name, and current mailing address.
2. Complete the section or sections of the application form for which a record change is requested. In the Type of Application area, identify the change (i.e., name, ownership, address, permit, or telephone).
3. A corporate name change may require an updated corporate certificate reflecting the change.
4. An Oregon assumed business name change requires an update with the Oregon Secretary of State, Corporation Division.
5. If your operation has a change in ownership, a new application for motor carrier account must be completed and submitted to ODOT. Upon approval of the application, a new account number will be assigned.

NOTE:

The completion of this form does not constitute authority to operate in the state of Oregon. In addition, a Temporary Pass, OR DOT plate must be obtained, or enrolled in the Oregon Weight-Mile Tax Program.

After your account application has been approved and you have registered a motor vehicle with the Department (see Vehicle Registration/Amendment, ODOT Form 735-9076), weight-mile tax report forms will be mailed to you.

ADDITIONAL INFORMATION MAY BE OBTAINED BY CALLING (503) 378-6699.

FILE THIS ORIGINAL APPLICATION WITH THE SALEM OR PORTLAND BRIDGE REGISTRATION OFFICE OR MAIL:

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

For downloadable forms, go to:

<https://www.oregon.gov/ODOT/MCT/Pages/FormsandTables.aspx>

To find out more about Oregon Trucking Online and the transactions you can process there, go to:

<https://www.oregontruckingonline.com/cf/MCAD/pubmetaentry/index.cfm>.

Watch for an email from the ODOT computer Security Unit notifying you of your password assignment for Trucking Online access. The password notification will be sent to the email address listed on your application. An activation notice will also be sent by U.S. mail to the official address of record for your account.

You can now pay Trucking Online transactions using "Direct Payment". Direct Payment is a secure electronic payment delivery system for Business and Individual bank accounts. The Direct Payment feature gives carriers another payment alternative to transacting business with a credit card or charging transactions to a CCD account.



Application For an Oregon Intrastate Certificate to Transport Household Goods

Before Filing

Household goods are defined as the personal effects or other property used or to be used in a dwelling but do not include property transported from a store or factory.

A motor carrier certificate of authority is required for persons or businesses providing and/or offering to provide for-hire transportation of household goods between points in Oregon.

ODOT Commerce and Compliance Division (CCD) can be reached by email at CCDHouseholdGoods@odot.oregon.gov or by phone at 503-378-5983 and can assist you with determining whether your Oregon transportation activities require a for-hire certificate. However, it is important that you remember you must clearly and accurately describe the service(s) you intend to provide to receive the most accurate information from staff. Small details can impact how Oregon transportation law is applied and enforced. You must also remember CCD staff are not attorneys. They may not be able to answer your questions if you present an unusual situation. Opinions offered by staff are not binding on the Department. If you want to consult with an attorney, you can contact the Oregon State Bar Lawyer Referral Service at 1-800-452-7636. Ask for an attorney familiar with transportation law.

Additional information is available online at <https://www.oregon.gov/odot/MCT/Pages/Commercial-Vehicle-Licensing-Services.aspx>.

CCD staff must determine whether applicants are fit, willing and able to provide the proposed service. Staff review each applicant's application, highway use tax payment and audit history, bond and insurance filing history, regulatory compliance history, criminal background information and safety records. Your application may be returned to you unprocessed if requested information is not provided. Use the checklist provided to ensure you have completed all steps and provided all documents to reduce processing times. If CCD intends to deny your application, we will notify you of the reason for the proposed denial and provide you with information regarding how to request a hearing. If you request a hearing, you will be notified of the time and place of the hearing.

Applicant Standards – OAR 740-035-0165

An applicant must show that it is fit, willing and able to provide the service sought in compliance with ORS Chapter 825 and Department rules. For the purpose of this application:

- (1) "Fit" means that the applicant has not, during the five years preceding the application, been convicted of a crime punishable by imprisonment for a period of time in excess of one year under the law under which he or she was convicted, or a crime regardless of punishment involving Theft; Burglary; Sexual conduct; Manufacture, sale or distribution of a controlled substance; Identity theft; or False statements.
- (2) "Willing" means the applicant is prepared to provide all service sought in the application in compliance with ORS Chapter 825 and Department rules; and
- (3) "Able" means the applicant has or can provide adequate facilities, vehicles and equipment to perform the service proposed; the applicant certifies that these vehicles comply with all Oregon laws and rules covering vehicle safety and operations and will be so maintained; and there is no significant evidence concerning the proposed service submitted by the applicant, by members of the public, or in the department's files that suggests a compelling reason to deny the application. Examples of evidence of a compelling reason to deny an application may include a record of a pattern of violations of laws or rules administered by the Department, or two or more complaints from customers regarding applicant's unsatisfactory resolution of loss or damage claims.

The Application Process Checklist

Before submitting your application for an Oregon Intrastate Certificate to Transport Household Goods:

1. ☐ **Register your business**, including your Assumed Business Name (ABN) if you have one, with the Oregon Secretary of State / Corporation Division. If you plan to operate as an individual or partnership under an assumed business name, a Limited Liability Company (LLC), or as a corporation, the name of your business must be registered with the Oregon Corporation Division. You do not need to submit any registration papers from the Oregon Corporation Division with this application. ODOT will confirm your registration with the Corporation Division.
2. ☐ **Obtain your Federal Employer Identification Number (FEIN)** from the Internal Revenue Service (IRS) and include a copy of the verification letter (CP-575) issued to applicant.
3. ☐ **Obtain your Oregon Business Identification Number (BIN)** from the Oregon Department of Revenue and include a copy of the verification letter issued to applicant.
4. ☐ **Register your business with the Federal Motor Carrier Safety Administration** and provide your USDOT Number on your Application for Motor Carrier Account. Ensure you register your ABN if you have one.
5. ☐ **Submit an Application for Motor Carrier Account** (form 9075) for your business.
6. ☐ **Submit a Power of Attorney** if joining a tariff bureau. You must file a tariff with your application. Your tariff must be approved by ODOT before a certificate is issued. If you wish to submit an independent tariff for approval, this will increase the time needed for the Department to complete the processing and approval of both your application and individual tariff. You can meet tariff requirements in one of these ways:
 - Join an existing tariff and submit a Power of Attorney for that tariff bureau. This is the most common way.
 - Have a tariff bureau or publishing agent publish an individual tariff for you.
 - Submit a complete individual tariff meeting ODOT requirements.
7. ☐ **Include a copy of the current registration for each vehicle to be used in your operation.** If operating interstate on a regular basis, apportioned registration is required. Oregon vehicle registration is subject to Oregon domicile requirements pursuant to ORS 803.360.
8. ☐ **Complete signed and dated vehicle rental or lease agreement** between the owner of the vehicle(s) and the business authorizing extended and exclusive use of vehicle(s) if you are not the registered owner.
 - Vehicle make, model, year, vehicle plate and state of issuance, Vehicle Identification Number (VIN) and gross Vehicle Weight Rating (GVWR).
 - Specific terms, conditions and exclusive use of the vehicle(s).
 - Effective date, duration and signatures of all parties to the agreement.
 - Contact information for all parties to the agreement.
9. ☐ **Complete signed and dated equipment point (terminal) rental or lease agreement** if you do not own the property. Lease/rental agreement must be between the owner of the property and the business, and include:
 - Complete address and brief description of the location.
 - Specific terms, conditions and stated use of the property.
 - Effective date, duration and signatures of all parties to the agreement.
 - Contact information for all parties to the agreement.
10. ☐ **Submit criminal background checks for all applicants and current subject individuals.** Applications must include a criminal background check for all owners, corporate officers, managers (if manager manages LLC) and those performing duties of a subject individual during the application process (such as an office manager). The background check must include all states the applicant has lived in for the five years immediately preceding the application submission. Criminal background checks will be used to determine an applicant's fitness. The Department reserves the right to request additional information when the Department is not satisfied that the information provided by the applicant is current, complete or valid. See OAR 740-035-0165 for more information about this requirement.
11. ☐ **Confirm your insurance provider offers the required cargo insurance.** Applicants must certify that they have cargo insurance coverage or other surety of at least \$10,000 to protect shippers against loss or damage to their household goods. Proof of the required coverage must be submitted by your insurance provider. Contact CCD at 503-378-5983 for insurance questions. Documentation may be submitted by fax to 503-378-5765 or email to CCDInsuranceSupport@odot.oregon.gov. If you intend to provide service only in Oregon and operate vehicles or combinations that exceed 26,000 pounds you must provide proof of Bodily Injury and Property Damage (BIPD) insurance coverage of at least \$750,000. If you operate interstate, your insurance filing with USDOT satisfies this requirement.
12. ☐ **Provide the application and \$300.00 application fee. Your application will not be processed until this has been done.** A \$300 application fee is required. Once an application is made, refund of the application fee is only

considered in limited circumstances where a request is made in writing prior to the Department's proposed decision and the Department finds that the request meets the requirements in ORS 825.180(2).

Instructions for Completing the Application

Page 1 – Type of Application: Select ‘new carrier’ if you are a first-time applicant.

Page 1 – Motor Carrier Legal Name and Address of Record:

- Name of carrier. This is the legal name of your business.
- Date of your application.
- Your Assumed Business Name (ABN) as registered with the Oregon Secretary of State / Corporation Division.
- Oregon Business Identification Number (BIN) issued to the business by Oregon Department of Revenue.
- Telephone number.
- Carrier mailing address.
- Carrier street address of your office and equipment point location(s).
- Carrier Entity Type as registered with the Oregon Secretary of State / Corporation Division
- Federal Employer Identification Number (FEIN) issued to business by the Internal Revenue Service and its state of incorporation or formation.
- Name, date of birth and title of individuals, partners, corporate officers or manager if a manager managed LLC.
- Certification of owner, all partners or a corporate officer.

Page 2 – Financial Statement:

Financial fitness and ability to provide the proposed service are evaluated. A complete and accurate Financial Statement (balance sheet) and either a current income statement for the prior year or a projected income statement for the upcoming year will be used to determine if an applicant meets those standards. Provide a current statement of financial condition for the applicant as of the date of the application, **or** the most current financial statement available. You may be required to amend, clarify and/or substantiate the information you provide.

Assets

Cash / Bank Accounts	Available funds on hand as of the date of the financial statement.
Accounts Receivables	Value of funds customers owe Applicant for goods/services already invoiced.
Notes Receivables	Value of notes receivables; asset accounts tied to any promissory notes between the “payee” (Applicant) and the “maker” of the note.
Materials and Supplies	Value of materials/supplies owned by Applicant (may include dollies, moving blankets, ramps, straps, cargo stability materials, etc.).
Vehicles (if applicable)	Equity value of vehicles currently owned by Applicant.
Real Estate	Equity value of property currently owned by Applicant.
Other Assets	Value and description of Applicant’s additional assets.
Total Assets	Value of all assets included on the application.

Liabilities

Accounts Payables	Funds Applicant owes to others (Including, but not limited to, electricity, phone, rental/lease/maintenance of business location, fuel, insurance, etc.).
Notes Payables	Value of payables for promissory notes between Applicant (the “maker” of the note) and its financiers (Including, but not limited to, banks, other financial institutions, investors/associates, friends, family, etc.).
Salaries/Wages Payables	Wages owed for work performed by those working for, or on behalf of, Applicant as employees, agents or representatives.
Accrued Taxes / Licenses	Local, state, federal or foreign taxes and licensing fees owed resulting from Applicant’s proposed services.
Vehicles (own, rent, lease)	Value of costs for vehicle finance, rental or lease.
Vehicles (maintenance, fuel)	Value of costs for vehicle maintenance and/or fuel.
Rented/Leased Facilities	Value of costs for rented and/or leased offices and equipment points.
Other Liabilities	Value and description of Applicant’s additional liabilities
Total Liabilities	Value of all liabilities included on the application.

Total net worth	Calculated by subtracting Total Liabilities from Total Assets.
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Page 2 – Income/projected income statement of applicant:

Provide a **projected** gross annual income statement representing the first year of operations after a certificate is issued. You may be asked to amend, clarify and/or substantiate the information you provide.

Reporting Period	Provide a year or month/year through month/year reporting period.
Operating Revenues	
Local Cartage	Revenues from local cartage service.
Other Than Local Cartage	Revenues from other than local cartage service.
Interstate Moving	Revenues from interstate moves
Warehousing	Revenues from sales of warehousing and/or storage-in-transit services.
Packing Materials / Supplies	Revenues from sales of materials and supplies.
Other Revenues	Revenues resulting from, or in furtherance of, other for-hire transportation services provided in Oregon.
Total Revenues	Total of projected gross annual income resulting from sales of transportation services in Oregon.
Operating Expenses	
Salaries / Wages / Benefits	Wages of those working for / on behalf of Applicant.
Payroll Taxes	Federal and Oregon payroll taxes.
Business Income Taxes (Oregon And Federal)	Oregon and federal business income taxes accrued.
Fuel/Maintenance Expenses	Fuel expense / vehicle maintenance expenses
Utilities	Expenses for offices and/or equipment points.
Rent	Expenses for rental or lease of office and/or equipment point locations.
Insurance	Expense for motor carrier liability / cargo insurance.
Other Operating Expenses	Expenses of Oregon transportation services.
Total Expenses	Total operating expenses resulting from projected sales of transportation services in Oregon.
Annual Net Profit Before Taxes	Calculated by subtracting "Total Projected Annual Operating Expenses" from "Total Projected Operating Revenues."
Annual Taxes	Income tax liability for Oregon transportation services.
Net Income	Calculated by subtracting "Projected Annual Taxes" from "Projected Annual Net Profit Before Taxes."

Page 3 – Tariff Participation:

Select the tariff that you will be participating in. The resources page in this packet includes contact information for OMSA and ARB.

Page 3 – Territory, Other Than Local Cartage Service:

This is usually applied for by county and applies to moves that are greater than fifty (50) air miles between the shipment origin and destination points. Approval of territory is determined after a review of each carrier's application and information. Origin counties requested should be within a 150 air-mile distance from your equipment point location(s).

Destination counties requested are listed in alphabetical order or you may request to serve all points in Oregon as destination points. See examples written in good form (below):

- Between all points in Clackamas, Hood River, Multnomah, Washington and Yamhill counties; and from all points within those counties, to all points in Benton, Lane, Lincoln, Linn and Deschutes counties.
- Between all points in Benton, Lane, Lincoln, Linn, Marion and Polk counties; and from all points within those counties, to all points in Oregon on the other.

Page 3 – Territory, Local Cartage Service:

This is usually applied for by city or commercial zone and applies an hourly rate to local moves conducted wholly within the air mile radius of the city or commercial zone authorized by the carrier's certificate. See Oregon Administrative Rule (OAR) 740-060-0110 for a list of designated commercial zones. Collective rate tariffs limit origin to destination hourly rates to the Portland and Salem commercial zones. Most local cartage shipments apply a terminal-to-terminal hourly rate for local

cartage service shipments. Equipment point(s) / terminal location(s) must be located within the proposed local cartage service area if the tariff rate to be applied is a terminal-to-terminal hourly rate. See examples below written in good form:

- Within the Portland commercial zone.
- Within Portland and Salem commercial zones.
- Within the Eugene commercial zone and within the corporate city limits of Springfield.
- Within the corporate city limits of Bend, Prineville and Redmond.

Page 3 – List of all equipment (power vehicles only):

Provide the requested information for each vehicle intended to be used in the business. If applicant will be renting vehicles from a truck rental company “as needed”, check the box stating you have no equipment and will use only rental equipment at this time, or check the box (same as above) and add a note stating you will use the equipment on your application and utilize rental equipment as needed.

Compliance Reminders

Familiarize yourself with applicable law for motor carriers operating in Oregon intrastate commerce transporting household goods for-hire. It is **your** responsibility to understand and comply with these regulatory requirements. You will be subject to periodic audits by the Department. Confirm information included in your application is current and does not conflict with information you have provided to other government agencies. Failure to remedy conflicting information may result in the delay of processing and approving your application.

ORS 825.100 prohibits the transportation of persons or property without possessing a valid certificate or permit issued by the Oregon Department of Transportation authorizing the proposed operation. ORS 825.950(1)(b) provides that, in addition to all other penalties provided by law, every person who violates or procures, aids or abets in the violation of ORS 825.100 by offering to transport OR transporting household goods without a certificate shall incur a civil penalty of not more than \$1,000.00 for every such violation.

Resources For Motor Carriers Applying for an Oregon Intrastate Certificate to Transport Household Goods

Resources	Phone Number(s)	Mailing Address	Website Information
Oregon Department of Transportation (ODOT) Commerce and Compliance Division (CCD)	503-378-5983	Mailing Address: 455 Airport Road SE, Building A Salem, OR 97301	Household Goods Moving in Oregon: Information for Carriers and Consumers: www.oregon.gov/odot/MCT/Pages/Household-Goods-Moving.aspx . Application Forms: www.oregon.gov/ODOT/Forms/Motcarrier/Household%20Goods%20Application%20Forms.pdf
Acceleration Transportation Rate Bureau, Inc. (ARB)	503-598-7451	Mailing Address: PO Box 19796 Portland, OR 97280-0796	https://arbmovers.com/
Oregon Moving and Storage Association (OMSA)	503-513-0005	Mailing Address: 4005 SE Naef Road Portland, OR 97267	https://ormsa.com
Federal Motor Carrier Safety Administration (FMCSA)	503-399-5775 800-832-5660 303-407-2350	Mailing Address: 1200 New Jersey Ave. SE Washington, DC 20590	www.fmcsa.dot.gov/registration/do-i-need-usdot-number
Oregon Secretary of State Corporation Division (OR SOS)	503-986-2200	Mailing Address: Public Service Building 255 Capitol St. NE, Suite 151 Salem, OR 97310	sos.oregon.gov/business/Pages/register.aspx



OREGON DEPARTMENT OF TRANSPORTATION
COMMERCE AND COMPLIANCE DIVISION
455 Airport Road SE, Building A
Salem, OR 97301
Phone: 503-378-5983
Fax: 503-378-5765

Application For an Oregon Intrastate Certificate to Transport Household Goods

Type of Application				
☐ NEW CARRIER ☐ NAME CHANGE ☐ ADDRESS/PHONE/EMAIL CHANGE ☐ ACCOUNT AMENDMENT ☐ OWNERSHIP CHANGE				
Motor Carrier Legal Name and Address of Record				
NAME OF CARRIER			DATE	
DOING BUSINESS AS (DBA OR ABN IF APPLICABLE)		OREGON BUSINESS IDENTIFICATION NUMBER		TELEPHONE NUMBER
CARRIER MAILING ADDRESS		CITY	STATE	ZIP
CARRIER STREET ADDRESS - OFFICE (IF DIFFERENT THAN ABOVE)		CITY	STATE	ZIP
CARRIER STREET ADDRESS - EQUIPMENT POINT (IF DIFFERENT THAN ABOVE)		CITY	STATE	ZIP
☐ INDIVIDUAL OWNERSHIP ☐ PARTNERSHIP ☐ LIMITED LIABILITY COMPANY (LLC) ☐ CORPORATION			☐ OTHER - (PROVIDE TYPE OF OWNERSHIP) STATE OF INC FEIN	
Complete Name, Date of Birth and Title of Individual, Partners, Corporate Officers or Manager (If Applicant is a Manager-Managed LLC)				
LAST	FIRST	MIDDLE	DATE OF BIRTH	TITLE
LAST	FIRST	MIDDLE	DATE OF BIRTH	TITLE
LAST	FIRST	MIDDLE	DATE OF BIRTH	TITLE
Certification				
I (we) hereby make application for authority to provide for-hire transportation of household goods in intrastate commerce and certify that application and supplemental materials content is true and correct, that no material fact has been omitted, that there is no person having any interest, directly or indirectly, in the ownership, possession, or control of the equipment listed or the operations to be conducted than is herein stated and the submission of this application does not constitute authority to operate. I (we) further certify that vehicles listed are in such operating order and so equipped as to comply with all Oregon laws, rules, and regulations covering vehicle registration, safety and operations and will be so maintained. I (we) agree to pay the fees and taxes required by Oregon law and provided for in Oregon revised statutes chapter 825 and 826 and to comply with the provisions thereof and obey all the rules and regulations of the Oregon Department of Transportation. I (we) understand household goods is a commodity requiring motor carrier cargo insurance in the minimum amount of \$10,000 that is in effect and on file with the Department.				
Complete Name, Signature and Social Security Number of Owner, All Partners or a Corporate Officer				
COMPLETE PRINTED NAME	SIGNATURE		SSN, IF NO FEIN PROVIDED ABOVE	
COMPLETE PRINTED NAME	SIGNATURE		SSN, IF NO FEIN PROVIDED ABOVE	
COMPLETE PRINTED NAME	SIGNATURE		SSN, IF NO FEIN PROVIDED ABOVE	

Submit an additional signature addendum page for any additional applicants for this operating authority.

Financial Statement:

Instructions: Applicant must provide the information below detailing a complete statement of financial condition as of the date of filing this application, or the most current date for which financial information is available.

BALANCE SHEET STATEMENT OF

DATE OF BALANCE
SHEET

Assets		Liabilities	
Cash / Bank Accounts	\$	Accounts Payables	\$
Accounts Receivables	\$	Notes Payables	\$
Notes Receivables	\$	Salaries / Wages Payables	\$
Materials and Supplies	\$	Accrued Taxes / Licenses	\$
Vehicles (if applicable)	\$	Vehicles (acquisition, rental, lease)	\$
Real Estate (equity)	\$	Vehicles (maintenance, fuel)	\$
Other Assets (describe and provide separately if necessary)	\$	Rented / Leased Facilities (office(s) and equipment point(s))	\$
		Other Liabilities (describe and provide separately if necessary)	\$
Total Assets:	\$	Total Liabilities:	\$

Total net worth: \$ _____

Income/projected income statement of applicant: **Year:** _____

Operating Revenues		Operating Expenses	
Local Cartage Moving Sales	\$	Salaries / Wages / Benefits	\$
Other than Local Cartage Moving Sales	\$	Payroll Taxes	\$
Interstate Moving Sales	\$	Oregon Income Tax	\$
		Federal Income Tax	\$
Warehousing Sales		Fuel / Vehicle Maintenance	\$
Packing Materials / Moving Supplies Sales	\$	Facility Utilities / Rent	\$
		Insurance	\$
Other Revenues (describe and provide separately if necessary)	\$	Other Expenses (describe and provide separately if necessary)	\$
Total Revenues:	\$	Total Expenses:	\$

Net profit before taxes (pretax income): \$ _____

Taxes: \$ _____

Net income: \$ _____

Tariff Participation:

Tariff (select tariff type)		
☐ OMSA	☐ ARB	☐ Independent Tariff
Territory – See instructions for examples of approved territory descriptions written in good form.		
Other than local cartage service: Specifically state the territory or area you propose to serve.		
Local cartage service: Specifically state the commercial zones and/or cities you propose to serve.		

List of Equipment (Power Equipment Only):

Instructions: List only the power vehicles intended to be used in providing the requested transportation service. Include the solo weight and any applicable combination weight(s) in addition to the other requested information in the table below. Continue on another page if necessary. **If any weight combinations exceed 12,000 pounds and you operate interstate, you will need apportioned plates.**

Body Type	Make Of Vehicle	Vehicle Identification Number (VIN)	Company Number	Weight Declarations				O - Owned L - Leased R - Rented	Base License Plate Number(State)
				Solo	Combinations				

☐ I (We) have no equipment and use only rental equipment, as needed, at this time.

I have included these documents with my application:	Documents that may be needed based on instructions and your business:
☐ Verification letter for Business Identification Number (BIN) ☐ Verification letter for Federal Employee Identification Number (FEIN) ☐ Application for Motor Carrier Account (form 9075) ☐ Current registration for each vehicle ☐ Criminal Background Check (CBC) for each applicant ☐ \$300 Application fee	☐ Power of Attorney for OMSA or ARB (needed unless you are publishing your own tariff) ☐ Equipment point (terminal) lease/rental agreement ☐ Vehicle lease/rental agreement



APPLICATION FOR CLASS 1A PERMIT

DO NOT WRITE IN SPACE ABOVE

(SEE INSTRUCTIONS ON REVERSE)

INSTRUCTIONS: THIS FORM IS TO BE USED TO MAKE APPLICATION FOR CLASS 1A PERMIT TO TRANSPORT INTRASTATE FOR-HIRE COMMODITIES (EXCEPT HOUSEHOLD GOODS). COMPLETE ALL INFORMATION REQUESTED AND MAIL WITH A \$300 APPLICATION FEE TO THE ADDRESS ABOVE. ALSO, INCLUDE COMPLETED FORM 735-9075.

CCD ACCOUNT NUMBER	NAME OF MOTOR CARRIER			
ADDRESS		CITY	STATE	ZIP CODE

REQUIRED

1. DO YOU OPERATE ONLY MOTOR VEHICLES WITH GROSS COMBINED WEIGHTS OF 10,000 POUNDS OR LESS? ☐ YES ☐ NO
2. DO YOU ONLY OPERATE MOTOR VEHICLES WITH A GROSS COMBINED VEHICLE WEIGHT OF 26,000 POUNDS OR LESS? (PROOF OF LIABILITY INSURANCE IS NOT REQUIRED.) ☐ YES ☐ NO
3. IS LIABILITY INSURANCE ON FILE WITH ODOT (REQUIRED FOR CARRIERS ENGAGED EXCLUSIVELY IN OREGON INTRASTATE OPERATIONS)? IF NO: YOUR COMPANY MUST BE ON FILE WITH FMCSA AS AN INTERSTATE CARRIER AND MUST COMPLY WITH FEDERAL REGULATIONS. ☐ YES ☐ NO
4. DO COMMODITIES YOU TRANSPORT REQUIRE CARGO INSURANCE? ☐ YES ☐ NO
NOTE: THIS REQUIREMENT WAIVED FOR SERVICE LIMITED TO COMMODITIES NOT SUBJECT TO MATERIAL DAMAGE THROUGH NORMAL TRANSPORTATION HAZARDS (LOGS, SAND/GRAVEL, LUMBER, WATER, WASTE, ETC.)
A. IF YES, IS CARGO INSURANCE ON FILE WITH ODOT? (MINIMUM LIMIT \$10,000.) ☐ YES ☐ NO
B. IF NO, TYPE OF COMMODITY BEING TRANSPORTED: _____
5. IS \$300 APPLICATION FEE ENCLOSED? ☐ YES

OPTIONAL

6. DO YOU WANT TO BE GOVERNED BY OREGON UNIFORM CARGO LIABILITY LAW? ☐ YES ☐ NO
7. DO YOU WANT TO BE GOVERNED BY ODOT'S UNIFORM CARGO CREDIT RULE? ☐ YES ☐ NO
8. DO YOU WANT TO BE GOVERNED BY ODOT'S UNIFORM BILL OF LADING RULE? ☐ YES ☐ NO
9. DO YOU WANT TO PARTICIPATE IN JOINT LINE RATES AND ROUTES APPROVED BY ODOT? ☐ YES ☐ NO
10. DO YOU WANT TO PARTICIPATE IN MILEAGE GUIDES APPROVED BY ODOT? ☐ YES ☐ NO
11. DO YOU WANT TO PARTICIPATE IN COMMODITY CLASSIFICATIONS APPROVED BY ODOT? ☐ YES ☐ NO

SIGNATURE OF APPLICANT		PRINTED NAME OF APPLICANT	
TITLE		DATE	

INSTRUCTIONS

This form is to be completed and submitted along with Form 735-9075, Application for Motor Carrier Account (New/Change) for obtaining a permit to transport property (except household goods) in intrastate commerce in Oregon.

APPLICATION PROCESS

Upon receipt of your completed application, ODOT staff will verify liability and cargo insurance filings. **YOUR PERMIT WILL NOT BE ISSUED UNTIL PROOF OF LIABILITY INSURANCE (if you operate vehicles over 26,000 pounds declared weight) AND CARGO INSURANCE (if you transport commodities subject to material damage through normal transportation hazards) ARE ON FILE WITH THE DEPARTMENT.**

ASSUMED BUSINESS NAME AND/OR CORPORATE QUALIFICATION

If you plan to operate as an individual or partnership using an assumed business name, or as a corporation, the name of your business or corporation must be registered with the Oregon Secretary of State, Corporation Division. All corporations and individuals or partnerships using assumed business names should contact that agency, Public Service Building, 255 Capitol Street NE, Suite 151, Salem, Oregon 97310-0210, (503) 986-2200, and get information on how to qualify and register. There is a fee for this registration/qualification. You do not need to submit any registration papers from the Corporation Division with this application. ODOT will confirm your registration directly with the Corporation Division.

COMPLETING THE APPLICATION

1. Vehicles Under 10,000 lbs: If all your vehicles have a gross vehicle weight of 10,000 pounds or less, please check the "YES" block. This information will assist us in determining which new carriers need to receive a New Carrier Education Packet a requirement for most new Oregon-based carriers as specified by ORS 825.402

2. and 3. Liability Insurance: Oregon intrastate for-hire carriers operating vehicles over 26,000 pounds must have a minimum \$750,000 liability insurance policy on file with ODOT. Please ask your insurance agent/company to file a Form E, Uniform Proof of Liability Insurance, with ODOT's Insurance and Bond Section. Your insurance agent may be able to submit a liability insurance binder which we will accept until the original Form E Filing is received from your insurance company. We must receive either a written binder, facsimile copy of a binder or Form E, or the original Form E before we will issue your Class 1A Permit. Please request that your insurance agent/company send these documents to ODOT Commerce and Compliance Division, Insurance and Bond Section, 455 Airport Road SE, Building A, Salem, Oregon 97301. Fax: (503) 378-3736.

4, 4A, and 4B. Cargo Insurance: Oregon intrastate for-hire carriers must have a minimum \$10,000 cargo insurance policy on file with ODOT. This commonly applies to carriers hauling general commodities. ODOT waives this requirement for carriers transporting commodities not subject to material loss or damage through normal transportation hazards. It is waived, for example, for carriers hauling logs, sand/gravel, lumber, plywood, wood chips, garbage, water, and a number of other commodities. Please ask your insurance agent/company to file a Form H, Uniform Proof of Cargo Insurance, with ODOT's Insurance and Bond Section. Your insurance agent may be able to submit a cargo insurance binder which we will accept until the original Form H filing is received from your insurance company. We must receive either a written binder, facsimile copy of a binder or Form H, or the original Form H before we will issue your Class 1A Permit. Please request that your insurance agent/company send these documents to ODOT Commerce and Compliance Division, Insurance and Bond Section, 455 Airport Road SE, Building A, Salem, Oregon 97301. Fax: (503) 378-3736.

5. Application Fee: Mail the original of this application and a \$300 application fee to: Commerce and Compliance Division, 455 Airport Road SE, Building A, Salem, Oregon 97301.

6. Oregon Uniform Cargo Liability Law (see note): Oregon law, Chapter 823, requires that common carriers issue a bill of lading on intrastate shipments and accept liability for cargo loss or damage. It provides that shippers have at least nine months after delivery to file claims and two years from the date a claim is denied to institute a suit.

7. Cargo Credit Rule (see note): OAR 740-055-0170 states that carriers cannot deliver or relinquish possession of freight until lawful transportation charges are paid. Carriers can, however, present the bill as many as seven days after delivery and they may extend credit for up to seven days after the bill is presented.

8. Uniform Bill of Lading Rule (see note): OAR 740-055-0170 requires that carriers prepare a bill of lading for every shipment transported. The rule details what information must be included on a bill of lading. Carriers may use an ODOT Uniform Bill of Lading form that is similar to the Straight Bill of Lading published in the National Motor Freight Classification (NMFC) Tariff. Whether you use the ODOT form or your own individual form, the bill of lading is an important legal document constituting the entire contract of carriage. It contains the terms and conditions of the contract (including carrier liability and claims), serves as a receipt for the goods transported, and is documentary evidence of the party entitled to delivery.

9. Joint Line Rates and Routes (see note): A joint line rate is a rate applicable to carriers involved in an interline freight movement. When carriers collaborate on such a rate, they need immunity from antitrust claims and prosecution. ODOT will provide optional regulatory oversight so that interlining carriers can set rates with antitrust immunity.

10. Mileage Guides (see note): Freight rates are often based on exact distances. Oregon tariff bureaus will continue to publish ODOT approved mileage guides that carriers may subscribe to and use as a basis for their rates.

11. Commodity Classifications (see note): Motor carriers have historically relied on commodity classifications in the NMFC Tariff to determine transportation rates. Carriers have also relied on it for packaging regulations. This will be the ODOT approved classification tariff that carriers may subscribe to and use.

NOTE: Any optional question (6 through 11) left blank will be reflected in your 1A Permit that you do not elect to participate in that optional regulation.

FOR ADDITIONAL INFORMATION, PLEASE CALL (503) 378-6699 OR (503) 378-6691.

NOTE: ONCE ODOT ISSUES A CLASS 1A PERMIT, A FEE OF \$50.00 MUST BE PAID PRIOR TO ISSUANCE OF A REVISED PERMIT (ORS 825.180(1) (d)).



Oregon

Tina Kotek, Governor

Department of Transportation
Commerce and Compliance Division
455 Airport Road SE, Building A
Salem, OR 97301

www.oregon.gov/ODOT/MCT/pages/index.aspx

RE: Application for Class 1A Permit – Transportation for Property (except Household Goods) For-hire within Oregon.

Enclosed is the Class 1A permit application package, which includes *Application for Motor Carrier Permit* and *Application for Class 1A Permit* forms. Both forms need to be completed.

It is very important that the instructions on the back of the *Application for Class 1A Permit* are followed regarding assumed business name and/or corporate qualification. The permit will not be issued until the required filing is made with the Oregon Secretary of State, Corporation Division.

An assumed business name registration is not required if an individual's complete given first and last (also referred to as "real and true name") are used in the business name, unless the "A" word or phrase is also included that suggests the existence of additional owners. This could be words and phrases such as "Company," "& Company," "& Associates," "& Son."

Here are examples:

Real and True Name	Do Not Register ABN	Register ABN
Jane Juniper Jones	Jane Juniper Jones Enterprises	Jane Juniper Jones Enterprises Jones Enterprises Jane J. Jones & Company Jane Jones & Associates
Michael L. Jones & John Smith	Michael L. Jones & John Smith Michael L. Jones & John Smith Enterprises	Michael L. Jones & John Smith Mike Jones & John Smith M. Jones & J. Smith Jones & Smith M & J Enterprises
Tom Sorenson Construction Inc.	Tom Sorenson Construction Inc.	Tom Sorenson Construction Tom Sorenson Homes TSC Homes

These registration forms are available from the:

- Oregon Secretary of State, Corporation Division

Business Registry
255 Capitol Street NE, Suite 151
Salem OR 97310-1327
Phone: 503-986-2200

- Agency's web page <https://sos.oregon.gov/business/Pages/business-registration-forms.aspx>

If you have questions about completing the enclosed forms please call 503-378-6699.



MOTOR RATES PETITION

INSTRUCTIONS: USE THIS FORM TO ESTABLISH OR CHANGE YOUR FOR-HIRE CARRIER RATES, FARES, CHARGES, CLASSIFICATIONS, OR RULES AND REGULATIONS GOVERNING PRACTICES OR SERVICES. IF MORE SPACE IS REQUIRED, ATTACH ADDITIONAL SHEETS. YOUR PROPOSAL MAY BE IN TARIFF FINAL FORM IF THE CHANGES ARE CLEARLY INDICATED. YOU MAY FAX THIS PETITION TO (503) 378-2183. PLEASE CALL (503) 979-6967 OR (503) 779-8083 IF YOU HAVE ANY QUESTIONS.

CARRIER (PETITIONER) COMPLETE BUSINESS NAME		OREGON AUTHORITY NUMBER	
PETITIONER'S MAILING ADDRESS	CITY	STATE	ZIP CODE

1. TARIFF NUMBER TO BE ESTABLISHED OR CHANGED:

2. TARIFF NUMBER (IF CANCELLATION OF A PRESENT TARIFF):

3. IS THIS A NEW TARIFF? ☐ YES ☐ NO

4. IS THIS AN ☐ INCREASE ☐ DECREASE OR ☐ NEITHER?

5. IF PROPOSAL IS BROAD IN NATURE (AFFECTS MUCH OF YOUR BUSINESS), BY WHAT PERCENT WILL REVENUE:

INCREASE _____ % OR DECREASE _____ % ?

6. WHAT DO YOU PROPOSE TO ESTABLISH OR CHANGE? (DESCRIBE ON A SEPARATE SHEET IF ADDITIONAL SPACE IS REQUIRED. THE PROPOSAL MAY BE IN TARIFF FORM).

7. WHAT FURTHER REASONS AND JUSTIFICATIONS DO YOU HAVE FOR THE PROPOSAL? (DESCRIBE ON A SEPARATE SHEET, IF ADDITIONAL SPACE IS REQUIRED.)

8. WHEN ARE PROPOSED CHANGES ON NEW ITEMS TO BE EFFECTIVE: _____ OR ☐ AS SOON AS POSSIBLE

IS THIS AN EMERGENCY? ☐ YES ☐ NO

CONTACT PERSON (PRINT NAME)	DATE	FAX NUMBER	PHONE NUMBER
SIGNATURE FOR PETITIONER	WHO PUBLISHES THE TARIFF?	SHOULD WE SEND AN APPROVAL COPY TO THEM?	☐ YES ☐ NO

ODOT USE ONLY - STAFF INITIAL STATUS

SIGNATURE	DATE	CIRCLE ASSIGNMENT	DOCKET NUMBER
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SERVICE TYPE: