

# International Registration Plan - Colorado Application

If the application is incomplete, it will be returned and not processed.

**Schedule A & C**

<b>I. Schedule A</b>	
Name Of Registrant	Registrant US DOT No.
E-Mail	D/B/A
Physical Address At Base Location	Account Number
Mailing Address (If Different Than Location)	License Year
Person To Contact Regarding Account	Expiration Month
Group Name	FEIN/SSN
Previously Based In Another Jurisdiction? <input type="checkbox"/> Yes <input type="checkbox"/> No	Supplement #
If Yes, Jurisdiction: _____ Expiration Date Of Credentials: _____	Carrier Type (Check Only One)
Vehicle Type: <input type="checkbox"/> TT – Truck Tractor <input type="checkbox"/> TR – Tractor <input type="checkbox"/> TK – Truck (Single) <input type="checkbox"/> RT – Road Tractor <input type="checkbox"/> ST – Semi-Trailer <input type="checkbox"/> FT – Full-Trailer <input type="checkbox"/> BS – Bus	<input type="checkbox"/> H – For Hire MC# _____ <input type="checkbox"/> P – Private <input type="checkbox"/> M – Household Mover
If Truck, does it pull a Trailer? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> E – Exempt-Common <input type="checkbox"/> R – Rental Fleet: <input type="checkbox"/> SOT paid at county

<b>II. Please Enter The Weight For Each Jurisdiction. Units Listed On This Page Will Be Authorized To Operate In The Jurisdiction And At The Weights/Axles Listed Below.</b>															
AL (Alabama)	AK (Alaska)	AZ (Arizona)	AR (Arkansas)	CA (California)	CO (Colorado)	CT (Connecticut)	DE (Delaware)	DC (Dist. of Col.)	FL (Florida)	GA (Georgia)	ID (Idaho)	IL (Illinois)	IN (Indiana)	IA (Iowa)	
KS (Kansas)	KY (Kentucky)	LA (Louisiana)	ME (Maine)	MD (Maryland)	MA (Mass.)	MI (Michigan)	MN (Minnesota)	MS (Mississippi)	MO (Missouri)	MT (Montana)	NE (Nebraska)	NV (Nevada)	NH (New Hamp.)	NJ (New Jersey)	
NM (New Mexico)	NY (New York)	NC (N. Carolina)	ND (N. Dakota)	OH (Ohio)	OK (Oklahoma)	OR (Oregon)	PA (Pennsylvania)	RI (Rhode Island)	SC (S. Carolina)	SD (S. Dakota)	TN (Tennessee)	TX (Texas)	UT (Utah)	VT (Vermont)	
VA (Virginia)	WA (Washington)	WV (W. Virginia)	WI (Wisconsin)	WY (Wyoming)	AB (Alberta)	BC (British Columbia)	MB (Manitoba)	NB (New Brunswick)	NF (Newfoundland)	NS (Nova Scotia)	PE (Prince Edward I)	ON (Ontario)	QC (Quebec) Total # axles:	SK (Saskatchewan)	

<b>III. Need Month Tab? <input type="checkbox"/> Yes <input type="checkbox"/> No    Temporary Cab Card? <input type="checkbox"/> Yes <input type="checkbox"/> No</b>																				
1. Trans Type *	2. Unit Number	3. Vehicle Identification Number (VIN)	4. Vehicle Make	5. Model Year	6. Vehicle Color	7. Fuel Type **	8. Unladen Weight	9. # of Axles/ Seats	10. Taxable Value	11. Purchase Price (Cannot be Zero)	12. Purchase or Lease Date	13. Colorado Title Number	14. Owner/Operator (if different than registrant)	15. US DOT # Responsible for Safety	16. Is the carrier responsible for safety changing? Y/N	17. FEIN/SSN per Vehicle Responsible for Safety	18. HVUT	19. EMIS	20. Miles (if unit traveled 9,999 miles or less)	21. New Plate

I certify that I am familiar with the federal motor carrier safety regulations and/or federal hazardous materials regulations. The undersigned, under oath, swears under penalty of perjury that the information furnished in this application and the attached schedules is true and correct.

Owner or Agent Signature	Title	Date
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\* A=ADD, C=Correction, D=Delete, D/T=Delete/Transfer, R=Regroup  
 \*\* B=Biodiesel, C=Comp. Natural Gas, D=Diesel, E=Plug-in Electric, F=Hybrid Electric, G=Gas, H=Hydrogen, M=Methanol, N=None, O=Other, P=Propane, T=Ethanol, X=Hydraulic Hybrid, Y=Liquefied Petroleum Gas, Z=Liquefied Natural Gas

IRP Account #

**IV. IRP Mileage Schedule & Recap Schedule B (Complete only 1 schedule B per fleet)**

List mileage for each jurisdiction in which the fleet traveled July 1, through June 30. Please check one of the following:  Actual Mileage  Estimates (I have no actual miles)

Jurisdiction	Actual Mileage	Jurisdiction	Actual Mileage	Jurisdiction	Actual Mileage	Jurisdiction	Actual Mileage	Jurisdiction	Actual Mileage	Jurisdiction	Actual Mileage	Jurisdiction	Actual Mileage
AL (Alabama)		FL (Florida)		ME (Maine)		NV (Nevada)		OR (Oregon)		VA (Virginia)		NF (Newfoundland)	
AK (Alaska)		GA (Georgia)		MD (Maryland)		NH (New Hamp.)		PA (Pennsylvania)		WA (Washington)		NS (Nova Scotia)	
AZ (Arizona)		ID (Idaho)		MA (Mass.)		NJ (New Jersey)		RI (Rhode Island)		WV (West Virginia)		NT (Northwest Terr.)	
AR (Arkansas)		IL (Illinois)		MI (Michigan)		NM (New Mexico)		SC (S. Carolina)		WI (Wisconsin)		PE (Prince Edward I)	
CA (California)		IN (Indiana)		MN (Minnesota)		NY (New York)		SD (S. Dakota)		WY (Wyoming (Y/N))		ON (Ontario)	
CO (Colorado)		IA (Iowa)		MS (Mississippi)		NC (N. Carolina)		TN (Tennessee)		AB (Alberta)		QC (Quebec)	
CT (Connecticut)		KS (Kansas)		MO (Missouri)		ND (N. Dakota)		TX (Texas)		BC (British Colum.)		SK (Saskatchewan)	
DE (Delaware)		KY (Kentucky)		MT (Montana)		OH (Ohio)		UT (Utah)		MB (Manitoba)		YT (Yukon)	
DC (Dist. of Col.)		LA (Louisiana)		NE (Nebraska)		OK (Oklahoma)		VT (Vermont)		NB (New Brunswick)		MX (Mexico)	

It is required that you write in your mileage reporting period (to the right) for the actual miles that were reported in SECTION IV:

<b>Mileage Reporting Period</b>	
July 1 Year	June 30 Year

Motor vehicle insurance or operator's coverage is compulsory in the State of Colorado. Proof of insurance is required prior to issuance of a registration. Non-compliance with this requirement is a misdemeanor traffic offense. Pursuant to 42-4-1409, C.R.S., the penalties for failure to have motor vehicle insurance coverage is a Class 1 Misdemeanor Traffic Offense punishable by a mandatory minimum ten days imprisonment, or three hundred dollar fine, or both or a mandatory maximum one year imprisonment, or one thousand dollar fine, or both shall be imposed by section 42-4-1701(3)(a)(II)(A), C.R.S.; and

- a. A minimum mandatory fine of not less than five hundred dollars or greater if imposed by the court; and
- b. At the discretion of the court, not less than forty hours of community service, subject to the provisions of section 18-1.3-507, C.R.S.
- c. A second or subsequent conviction within a period of five years following a prior conviction, a minimum mandatory fine of not less than one thousand dollars. After obtaining a registration, you will be required to sign an affirmation clause indicating compliance with insurance requirements.

Unless a person waives his or her confidentiality, the information contained in the person's motor vehicle record shall not be used for any purpose other than a purpose authorized by law, pursuant to C.R.S. 42-2-121 (4)(a).

Printed name of Owner/Agent as it Appears on Identification

Secure and Verifiable ID of Owner/Agent: <input type="checkbox"/> Colorado DL <input type="checkbox"/> Colorado ID <input type="checkbox"/> Other	ID #	Expires	Date of Birth
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The undersigned witness affirms that the owner of the vehicle identified in this document presented the identification described above.

Witness Signature	Date
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I Certify That I Am Familiar With The Federal Motor Carrier Safety Regulations And/Or Federal Hazardous Materials Regulations. The Undersigned, Under Oath, Swears Under Penalty Of Perjury That The Information Furnished In This Application And The Attached Schedules Is True And Correct.

Owner or Agent Signature	Title	Date
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