www.dmvNow.com
Virginia Department of Motor Vehicles
Post Office Box 27412
Richmond, Virginia 23269-0001

UNIFIED CARRIER REGISTRATION 2017
VEHICLE LIST 101

CARRIER/BUSINESS INFORMATION

USDOT NUMBER	MC OR MX NUMBER	FF NUMBER	TELEPHONE NUMBER	FAX NUMBER

CARRIER FULL LEGAL NAME	EMAIL ADDRESS

DOING BUSINESS AS NAME

BUSINESS PRINCIPAL LOCATION (street address) (city) (state) (zip code)

MAILING ADDRESS (if different from above) (street address) (city) (state) (zip code)

CLASSIFICATION (check all that apply)

☐ MOTOR CARRIER ☐ MOTOR PRIVATE CARRIER

VEHICLE LIST

Use this chart and the one on the reverse of this form to record the vehicles you use exclusively in intrastate transportation of property, waste, or recyclable material. This data may be maintained in an electronic format.

VEHICLE MAKE	VEHICLE MODEL	LICENSE PLATE NUMBER & STATE OF ISSUE	VIN NUMBER

PAGE _1_ OF _____

CERTIFICATION

I certify and affirm that all information presented in this form is true and correct, that any documents I have presented to DMV are genuine, and that the information included in all supporting documentation is true and accurate. I make this certification and affirmation under penalty of perjury and I understand that knowingly making a false statement or representation on this form is a criminal violation.

OWNER, CARRIER, AUTHORIZED REPRESENTATIVE NAME (print)	TITLE

SIGNATURE	DATE

CARRIER/BUSINESS INFORMATION (repeated from page 1)

USDOT NUMBER	MC OR MX NUMBER	FF NUMBER	CARRIER NAME

VEHICLE LIST (con't)

VEHICLE MAKE	VEHICLE MODEL	LICENSE PLATE NUMBER & STATE OF ISSUE	VIN NUMBER