UNIFIED CARRIER REGISTRATION FORM – UCR-2
VEHICLES OWNED AND OPERATED FOR
THE 12 MONTH PERIOD ENDING June 30, 2015~~5~~6
UCR REGISTRATION YEAR 2017~~6~~

(NOTE: This form is provided to assist you in maintaining required information. Carriers may also submit the requested data in electronic format or in a printout attached to this form. Contact your state agency for acceptable data formats.)

SECTION 1. GENERAL INFORMATION

USDOT Number	MC or MX Number	FF Number	Telephone Number	Fax Number

Legal Name	E-Mail Address

Doing Business Under The Following Name (DBA)

Principal Place Of Business Street Address (See Instructions)

Principal Business City	Principal Business State	Zip Code

Mailing Street Address

Mailing City	Mailing State	Mailing Zip Code

SECTION 2. CLASSIFICATION – *Check All That Apply*

☐ Motor Carrier ☐ Motor Private Carrier

SECTION 3. VEHICLE LIST

The above described carrier hereby declares that the following vehicles are the total number owned and operated for the 12 month period ending June 30, 2016~~5~~:

MAKE	MODEL/GVWR/ Number of Passengers	LICENSE PLATE NUMBER/STATE	VIN NUMBER
A: STRAIGHT TRUCKS AND TRACTORS			
B. MOTOR COACHES, SCHOOL BUSES, MINI-BUSES, VANS, AND LIMOUSINES			

Use reverse side if needed.

SECTION 4. CERTIFICATION

I, the undersigned, under penalty for false statement, certify that the above information is true and correct and that I am authorized to execute and file this document on behalf of the applicant. (Penalty provisions subject to the laws of the registration state.)

Name Of Owner Or Authorized Representative (Printed)	Date

Signature	Title

UNIFIED CARRIER REGISTRATION FORM UCR-2 Continued

USDOT Number	MC or MX Number	FF Number	Carrier Name

VEHICLE LIST CONTINUED

MAKE	MODEL/GVWR/ Number of Passengers	LICENSE PLATE NUMBER/STATE	VIN NUMBER
A: STRAIGHT TRUCKS AND TRACTORS			
B. MOTOR COACHES, SCHOOL BUSES,MINI-BUSES, VANS, AND LIMOUSINES			

Make additional copies of this sheet if needed