



MOTOR CARRIER (CA) #

**NOTICE OF CHANGE**  
Motor Carrier Permit

This form is to be completed for a change of name, change of address, or adding or deleting a "Doing Business As" (DBA) name. If your business entity (i.e., individual, partnership, corporation, limited liability company) has changed in some way, a new application must be filed and a new CA number must be obtained from the California Highway Patrol. A Fictitious Business Name Statement is required when adding a DBA name.

CHANGE OF NAME                       CHANGE OF ADDRESS                       ADDING/DELETING DBA

**SECTION A: INFORMATION ON RECORD WITH THE DEPARTMENT**

*Complete all items in this section.*

MOTOR CARRIER LEGAL NAME				
BUSINESS ADDRESS	CITY	COUNTY	STATE	ZIP CODE
MAILING ADDRESS (IF DIFFERENT FROM BUSINESS ADDRESS)	CITY	COUNTY	STATE	ZIP CODE

**SECTION B: REQUESTED CHANGES TO THE MOTOR CARRIER PERMIT ACCOUNT**

*Complete only the items that are changing.*

MOTOR CARRIER LEGAL NAME			TELEPHONE NUMBER (    )	
BUSINESS ADDRESS (NOT P.O. BOX OR PMB)	CITY	COUNTY	STATE	ZIP CODE
MAILING ADDRESS (IF DIFFERENT FROM BUSINESS ADDRESS)	CITY	COUNTY	STATE	ZIP CODE
ADD DBA	DELETE DBA			

*I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.*

SIGNATURE OF AUTHORIZED REPRESENTATIVE <b>X</b>	DATE
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If you have any questions, call (916) 657-8153.  
Return the completed form to:

**REGULAR ADDRESS:**  
DEPARTMENT OF MOTOR VEHICLES  
REGISTRATION OPERATIONS DIVISION MS: G875  
P. O. BOX 932370  
SACRAMENTO, CA 94232-3700

**OVERNIGHT ADDRESS:**  
DEPARTMENT OF MOTOR VEHICLES  
REGISTRATION OPERATIONS DIVISION MS: G875  
2415 1ST AVENUE  
SACRAMENTO, CA 95818