

## 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

DATE

**X**

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