



MISSOURI DEPARTMENT OF TRANSPORTATION
MOTOR CARRIER SERVICES
P.O. BOX 893, 1320 CREEK TRAIL DRIVE
JEFFERSON CITY, MO 65102-0893
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WEB SITE ADDRESS: www.carrier.state.mo.us

EQUIPMENT REGISTRATION FORM

DOCUMENT CHECKLIST ON BACK OF FORM

APPLICATION #	FEDERAL ID/SOCIAL SECURITY NO.	TYPE OF TRANSACTION	PAGE _____ OF _____
TYPE OF OPERATION <input type="checkbox"/> EXEMPT COMMODITY <input type="checkbox"/> HOUSEHOLD GOODS <input type="checkbox"/> PRIVATE <input type="checkbox"/> FOR-HIRE RENTAL: <input type="checkbox"/> PRIVATE <input type="checkbox"/> FOR-HIRE		PERSON TO CONTACT	TELEPHONE NUMBER

REGISTRATION YEAR	NAME OF REGISTRANT		FAX NUMBER
ACCOUNT NUMBER	DBA NAME		IFTA DECAL REQUEST
FLEET NUMBER	BUSINESS ADDRESS (WHERE FLEET IS BASED)	COUNTY	THE NUMBER OF DECALS ISSUED MUST RECONCILE WITH THE NUMBER OF TRUCKS LICENSED, AND WILL BE SUBJECT TO AUDIT.
U.S. DOT NUMBER	CITY, STATE, ZIP CODE		IFTA LICENSE NUMBER
IFTA LICENSE NUMBER	MAILING ADDRESS FOR BILLS, CAB CARDS, PLATES (NO P.O. BOX NUMBERS)	COUNTY	NUMBER OF DECALS REQUESTED SETS
FMCSA MC NUMBER	CITY, STATE, ZIP CODE	REGISTRANT TELEPHONE NUMBER	JURISDICTIONAL WEIGHTS

EQUIPMENT ADDITION SECTION			EQUIPMENT ADDITION SECTION			LIST WEIGHT WHEN ADDING STATES OR WHEN WEIGHT IS GREATER THAN THE MISSOURI COMBINED GROSS WEIGHT		
EQUIPMENT NUMBER			EQUIPMENT NUMBER			AL	MA	TX
MODEL YEAR & MAKE			MODEL YEAR & MAKE			AK	MI	UT
VEHICLE IDENTIFICATION NUMBER			VEHICLE IDENTIFICATION NUMBER			AB	MN	VT
VEHICLE TYPE & FUEL TYPE	VEHICLE TYPE	FUEL TYPE	VEHICLE TYPE & FUEL TYPE	VEHICLE TYPE	FUEL TYPE	AZ	MS	VA
AXLES	POWER UNIT AXLES	TRAILER UNIT AXLES	AXLES	POWER UNIT AXLES	TRAILER UNIT AXLES	AR	MT	WA
COMBINED GROSS WEIGHT / SEATS			COMBINED GROSS WEIGHT / SEATS			CA	NE	WV
UNLADEN WEIGHT			UNLADEN WEIGHT			CO	NV	WI
LATEST PURCHASE PRICE			LATEST PURCHASE PRICE			CT	NH	WY
FACTORY PRICE			FACTORY PRICE			DE	NJ	MX
DATE OF PURCHASE			DATE OF PURCHASE			DC	NM	BC
NAME OF LESSEE AND/OR LESSOR			NAME OF LESSEE AND/OR LESSOR			FL	NY	MB
TITLE NUMBER			TITLE NUMBER			GA	NC	NB
PLATE NUMBER			PLATE NUMBER			ID	ND	NL
						IL	OH	NS
						IN	OK	NT
						IA	OR	ON
						KS	PA	PE
						KY	RI	PQ
						LA	SC	SK
						ME	SD	YT
						MD	TN	

EQUIPMENT DELETION SECTION			EQUIPMENT DELETION SECTION			REFUND REQUEST		
EQUIPMENT NUMBER			EQUIPMENT NUMBER			IF YOU ARE REMOVING A POWER UNIT THAT IS REGISTERED FOR MORE THAN 54,000 POUNDS YOU MAY REQUEST THE REMAINING MISSOURI PORTION OF THE FEES AS A REFUND, BY MARKING THE APPROPRIATE BOX BELOW AND SIGNING ON THE PROVIDED LINE.		
MODEL YEAR & MAKE			MODEL YEAR & MAKE			<input type="checkbox"/> PLEASE ISSUE A REFUND FOR THE REMAINING PORTION OF MY MISSOURI FEES.		
VEHICLE IDENTIFICATION NUMBER			VEHICLE IDENTIFICATION NUMBER			ORIGINAL SIGNATURE (SORRY, NO COPY OF SIGNATURE ACCEPTED)		
PLATE NUMBER			PLATE NUMBER			X		
COMBINED GROSS WEIGHT			COMBINED GROSS WEIGHT			REG. DATE	EXAMINED BY/DATE	

CHECK LIST: BELOW ARE THE DOCUMENTS WHICH NEED TO BE SUBMITTED TO OUR OFFICE FOR EACH TYPE OF TRANSACTION. EACH TRANSACTION TYPE MUST BE COMPLETED ON A SEPARATE EQUIPMENT REGISTRATION FORM. PLEASE SUBMIT “COPIES” OF SUPPORTING DOCUMENTS UNLESS OTHERWISE NOTED.

<p align="center">NEW ACCOUNT OR NEW FLEET</p> <p><input type="checkbox"/> COMPLETED EQUIPMENT REGISTRATION FORM</p> <p><input type="checkbox"/> COMPLETED MILEAGE REGISTRATION FORM IF VEHICLE(S) WERE OPERATED DURING REPORTING PERIOD - ACTUAL MILEAGE IS REQUIRED.</p> <p><input type="checkbox"/> COMPLETED IFTA FORM</p> <p><input type="checkbox"/> SECRETARY OF STATE PAPERS IF APPLICABLE</p> <p><input type="checkbox"/> TITLE OR VALIDATED TITLING RECEIPT</p> <p><input type="checkbox"/> LEASE AGREEMENT, IF LEASED</p> <p><input type="checkbox"/> HEAVY HIGHWAY VEHICLE USE TAX RECEIPT (IRS-FORM 2290) FOR POWER UNITS BEING LICENSED 55,000 LBS. OR HIGHER</p> <p><input type="checkbox"/> CURRENT MISSOURI COUNTY PERSONAL PROPERTY TAX RECEIPT OR TAX WAIVER</p>	<p align="center">EQUIPMENT ADDITION</p> <p><input type="checkbox"/> COMPLETED EQUIPMENT REGISTRATION FORM</p> <p><input type="checkbox"/> TITLE OR VALIDATED TITLING RECEIPT</p> <p><input type="checkbox"/> LEASE AGREEMENT, IF LEASED</p> <p><input type="checkbox"/> HEAVY HIGHWAY VEHICLE USE TAX RECEIPT (IRS-FORM 2290) FOR POWER UNITS BEING LICENSED 55,000 LBS. OR HIGHER</p>	<p align="center">TRANSFER</p> <p><input type="checkbox"/> COMPLETED EQUIPMENT REGISTRATION FORM</p> <p><input type="checkbox"/> TITLE OR VALIDATED TITLING RECEIPT</p> <p><input type="checkbox"/> LEASE AGREEMENT, IF LEASED</p> <p><input type="checkbox"/> HEAVY HIGHWAY VEHICLE USE TAX RECEIPT (IRS-FORM 2290) FOR POWER UNITS BEING LICENSED 55,000 LBS. OR HIGHER</p> <p><input type="checkbox"/> ORIGINAL CAB CARD ON DELETED UNIT OR PLATE IF THE ORIGINAL CAB CARD IS LOST</p>	<p align="center">EQUIPMENT DELETION</p> <p><input type="checkbox"/> COMPLETED EQUIPMENT REGISTRATION FORM</p> <p><input type="checkbox"/> ORIGINAL CAB CARD</p> <p><input type="checkbox"/> LICENSE PLATE</p>
<p align="center">ADDING JURISDICTIONS</p> <p><input type="checkbox"/> COMPLETED EQUIPMENT REGISTRATION FORM LISTING “ALL” ACTIVE POWER UNITS</p> <p><input type="checkbox"/> ORIGINAL CAB CARD(S)</p> <p><input type="checkbox"/> INDICATE NEW JURISDICTIONAL WEIGHTS</p>	<p align="center">GROSS WEIGHT INCREASE (SAME VEHICLE)</p> <p><input type="checkbox"/> COMPLETED EQUIPMENT REGISTRATION FORM</p> <p><input type="checkbox"/> ORIGINAL CAB CARD</p> <p><input type="checkbox"/> LICENSE PLATE IF CHANGING MISSOURI WEIGHT</p> <p><input type="checkbox"/> HEAVY HIGHWAY VEHICLE USE TAX RECEIPT (IRS-FORM 2290) FOR POWER UNITS BEING LICENSED 55,000 LBS. OR HIGHER</p>	<p align="center">WEIGHT CHANGE (TWO DIFFERENT VEHICLES)</p> <p><input type="checkbox"/> COMPLETED EQUIPMENT REGISTRATION FORM</p> <p><input type="checkbox"/> TITLE OR VALIDATED TITLING RECEIPT</p> <p><input type="checkbox"/> LEASE AGREEMENT, IF LEASED</p> <p><input type="checkbox"/> HEAVY HIGHWAY VEHICLE USE TAX RECEIPT (IRS-FORM 2290) FOR POWER UNITS BEING LICENSED 55,000 LBS. OR HIGHER</p> <p><input type="checkbox"/> ORIGINAL CAB CARD ON DELETED UNIT</p> <p><input type="checkbox"/> LICENSE PLATE ON DELETED UNIT</p>	<p align="center">FLEET-TO-FLEET TRANSFER</p> <p><input type="checkbox"/> COMPLETED EQUIPMENT REGISTRATION FORM FOR THE FLEET YOU ARE ADDING TO</p> <p><input type="checkbox"/> COMPLETED EQUIPMENT REGISTRATION FORM FOR THE FLEET YOU ARE DELETING FROM</p> <p><input type="checkbox"/> ORIGINAL CAB CARD</p> <p><input type="checkbox"/> SURRENDER LICENSE PLATE ONLY IF CHANGING COMBINED GROSS WEIGHT OR WHEN ADDING A DIFFERENT VEHICLE</p>
<p align="center">REPLACEMENT CAB CARD</p> <p><input type="checkbox"/> COMPLETED EQUIPMENT REGISTRATION FORM LISTING ALL THE VEHICLE INFORMATION UNDER THE ADDITION SECTION</p>	<p align="center">DUPLICATE PLATE</p> <p><input type="checkbox"/> COMPLETED EQUIPMENT REGISTRATION FORM</p> <p><input type="checkbox"/> NOTARIZED AFFIDAVIT OF LOST PLATE</p>	<p align="center">MISC. CHANGE OF INFORMATION</p> <p><input type="checkbox"/> COMPLETED EQUIPMENT REGISTRATION FORM LISTING THE TYPE OF CHANGE BEING MADE</p> <p><input type="checkbox"/> TITLE OR VALIDATED TITLING RECEIPT (IF APPLICABLE)</p> <p><input type="checkbox"/> LEASE AGREEMENT (IF APPLICABLE)</p> <p><input type="checkbox"/> ORIGINAL CAB CARD</p>	

EQUIPMENT REGISTRATION FORM INSTRUCTIONS

General Information Section

Application Number - This number is issued by Motor Carrier Services.

Federal ID/Social Security Number - Enter the **registrant's** Federal Identification Number or Social Security Number.

Type of Transaction - Indicate add, transfer, deletion, etc. (See back of form for other transaction types and documents required.)

Type of Operation - Enter "X" in the boxes which describe the registrant's business.

Person to Contact - Indicate the individual responsible for the completion of the forms and who is familiar with the requirements of the application.

Telephone Number - Enter the area code and phone number of the contact person.

Registration Year - Enter all four digits of the registration year (e.g., 2005).

Account Number - Enter the number assigned by Motor Carrier Services (If new, leave blank).

Fleet Number - Enter the number assigned by Motor Carrier Services.

U.S. Department of Transportation (U.S. DOT) Number - Enter your U.S. DOT number. If you do not have a U.S. DOT number, you must complete a MCS-150 form. (To obtain immediately: <http://www.usdotnumberregistration.com>)

International Fuel Tax Agreement (IFTA) License Number - Enter your IFTA license number. If leased, indicate "leased" in box.

Federal Motor Carrier Safety Administration (FMCSA) Number - Enter your FMCSA MC number. If leased, indicate, "leased" in box.

Name of Registrant - Enter the name in which you are applying for plates.

DBA Name - If applicable, enter the name in which the registrant does business.

Business Address - Enter the Missouri address where the registrant has an established place of business.

County - Enter the county in which the business address is located.

Mailing Address - Enter the address where the registrant desires his/her registration credentials mailed. **This cannot be a post office box number.**

County - Enter the county in which the mailing address is located.

Registrant Telephone Number - Enter the area code and phone number of the registrant. **Service Agent telephone numbers are not acceptable.**

Fax Number - Enter your area code and fax number.

International Fuel Tax Agreement (IFTA) Decal Request

Complete this section when adding additional qualified vehicles to the apportioned fleet and you need to obtain decals.

IFTA License Number - Enter your IFTA license number.

Number of Decals Requested - Enter the number of decal sets you are requesting. (The number of decals issued must reconcile with the number of trucks licensed, and will be subject to audit.)

Equipment Addition Section

Equipment Number - Enter the equipment number or unit number you have assigned to each power unit or trailer.

Model Year & Make - Enter the four digits of the model year and the make of the power unit or trailer.

Vehicle Identification Number (VIN) - Enter the complete VIN as listed on title or application for title.

Vehicle Type/Fuel Type - Enter the type of vehicle; TK = Straight Truck, TR = Tractor, TT = Truck Tractor, RT = Road Tractor, ST = Semi-Trailer, FT = Full Trailer, BS = Bus, CG = Converter Gear. Enter the type of fuel being used by the power unit (If trailer, leave blank).

Axles - Enter the number of axles under each power unit and each trailer (each axle in a tandem group is one axle). **When prorating with Quebec the combination of both tractor and trailer axles will be shown on the cab card.**

Combined Gross Weight/Seats - Enter the Missouri weight classification in which the vehicle is being licensed. Enter the actual seating capacity for **buses**.

Unladen Weight - Enter the empty weight of the power unit or trailer.

Latest Purchase Price - Enter the actual purchase price of the vehicle paid by the current owner, including accessories or modifications attached to the vehicle.

Factory Price - This is ninety percent (90%) of the manufacturer's retail price, including accessories or modifications attached to the vehicle, but excludes trade-in and sales tax.

Date of Purchase - Enter the month, day, and year the power unit or trailer was purchased by the current owner.

Name of Lessee &/or Lessor - Enter the name of the owner-operator, service representative, or lessee.

Title Number - Enter the number shown on the **registrant's** Missouri title.

Plate Number - Enter the plate number issued by Motor Carrier Services that has not expired.

Equipment Deletion Section

Equipment Number - Enter the equipment number or unit number you have assigned to the power unit or trailer that is being removed from service.

Model Year & Make - Enter the four digits of the model year and the make of the power unit or trailer.

Vehicle Identification Number (VIN) - Enter the complete VIN as listed on title or application for title.

Plate Number - Enter the plate number issued by the Motor Carrier Services that has not expired.

Combined Gross Weight - Enter the Missouri weight classification in which the vehicle is licensed.

Jurisdictional Weights

Refer to the Motor Carrier Services Weight Chart. List **only** the weights for the IRP jurisdictions that will be different than the Missouri combined gross weight. If adding a new jurisdiction, enter the weights next to the new jurisdiction(s) being added.

Refund Request

If you are removing a power unit that is registered for more than 54,000 pounds or you may request the **remaining Missouri** portion of the fees as a refund by marking the appropriate box and signing the form. **No photocopy of a signature will be accepted.**