

PHONE: 573.751.3358 FAX: 573.522.6708

TOLL FREE: 866.831.6277 Option 3

REGISTER AND PAY ONLINE at: www.modot.org/mce UNIFIED CARRIER REGISTRATION - 2014

SECTION 1. GENERAL INFORMATION									
USDOT NO.			MC or MX NO. FF NO.						
NAME OF CARRIER									
TRADE OR DBA (DOING BUSINESS AS) NAME									
PRINCIPAL PLACE OF BUSINESS ADDRESS (Not a PO Box) STREET									
CITY						STATE ZIP CODE			
MAILING ADDRESS (If different from Principal address) STREET									
CITY					STATE Z			ZIP CODE	
E-MAIL A	DDRESS			DAYTIME PHONE NO. FAX NO.					
SECT	ON 2 CLASSIFIC	ATION (chack all that a	nn/v)						
SECTION 2. CLASSIFICATION (check all that apply) Motor Carrier							☐ Freight Forwarder		
SECTION 3. FEES – BROKERS, FREIGHT FORWARDERS AND LEASING COMPANIES									
NOTE: If your company is also a motor carrier or motor private carrier, SKIP this section and go to SECTION 4.									
Brokers, freight forwarders and leasing companies (not combined with a Motor Carrier entity), please submit the amount due of \$76 in the form of payment									
acceptable by your base state and skip to SECTION 7.									
SECTION 4. NUMBER OF MOTOR VEHICLES – MOTOR CARRIER & MOTOR PRIVATE CARRIER									
CHECK ONLY ONE BOX:									
Option	A 🔲 The number	er of vehicles shown belo	w has been taken from	Section 26 of my last repo	rted MCS-15	0 Form.			
Option B The number of vehicles shown below is the total number owned and operated for the last 12-month period ending June 30, 2013.									
(See Instructions for additional requirements if you select Option B)									
LINE		BER OF STRAIGHT		•				TOTAL	
NO	IRU	CKS & TRACTORS (COLUMN A)	(COLUMN B)	MINI-BUSSES, VANS AND LIMOUSINES (COLUMN C)				(COLUMN D)	
1.		(COLOMIN A)	(COLUMN D)	(COLDINIA C)				(COLONIN D)	
	Subtract:								
2.	(A) The number of vehicles on Line 1 in Column C that has a vehicle capacity of 10 or less passengers (including the driver).								
	(B) Optional. The number of vehicles in Line 1 in Column A that are used exclusively in intrastate transportation. You are)		
	maintain a list of vehicles excluded under this option. (See Instructions for additional requirements if you select this option)							()	
3.	Optional. Add a number of vehicles not shown on Line 1 that are:								
	(A) Commercial motor vehicles operating exclusively in intrastate commerce. (See Instructions for definition of commercial motor vehicle)								
	(B) Vehicles used in commerce to transport passengers or property for compensation and have a GVWR or GVW of 10,000 lbs or less, or a passenger capacity of 10 or less (including the driver).								
4. Total Number of Vehicles (Line 1 minus Line 2 plus Line 3)									
	ON 5. FEE TABLE	'	o z prac zmo o)						
1			NUMBER OF VEHICLES	S AMOUNT DUE	NUMBER C	ER OF VEHICLES		MOUNT DUE	
0-2 \$76		6-20	\$452	101	-1000	\$7,511			
3-5 \$227		21-100	\$1,576	1001	or more	\$73,346			
SECTION 6. FEES DUE – MOTOR CARRIER & MOTOR PRIVATE CARRIER									
Using the number of vehicles in section 4, Line 4, enter the Amount Due from the Fee Table.								\$	
SECTION 7. 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									