

Supplemental Application - Schedule C

Utah State Tax Commission - Motor Carrier Services - IRP
 Telephones: (801) 297-6800 or 1-888-251-9555; Fax (801) 297-6899

TC-853 Rev. 7/07

Account number UT-		Fleet	License year	Federal ID (FEIN/EIN)	U. S. DOT number	Utah IFTA account number	Application effective date	Registration period (check one)	
Name of applicant				Business telephone number (must be a Utah number)			Person to contact regarding application		
Business street address (where records are kept - must be a Utah physical address)				Mailing street address			Contact's city	Contact's state	
City	County	State UT	ZIP code	City	State	ZIP code	Contact's telephone number	Contact's fax number	
Type of operation (check the ONE that applies)						Is this an organization exempt from property tax?		Do you currently have Wyoming intrastate operating authority?	
<input type="checkbox"/> For hire	<input type="checkbox"/> Private	<input type="checkbox"/> Rental	<input type="checkbox"/> Exempt	<input type="checkbox"/> Household goods	<input type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> Yes <input type="checkbox"/> No		If previously prorated in another state provide previous state and account number State: _____ Account no.: _____

Registered Weights (list on this schedule only the units that will operate at the same weight in the IRP jurisdictions) - if traveling in Quebec, list the total combined axles for power units/trailers and the gross weight for buses)

AB	AK	AL	AR	AZ	BC	CA	CO	CT	DC	DE	FL	GA	HI	IA	ID	
IL	IN	KS	KY	LA	MA	MB	MD	ME	MI	MN	MO	MS	MT	MX	NB	
NC	ND	NE	NF	NH	NJ	NM	NS	NT	NV	NY	OH	OK	ON	OR	PA	
RI	PR	QC (see note)*	SC	SD	SK	TN	TX	UT	VA	VT	WA	WI	WV	WY	YT	

Action code*	Equipment number	Vehicle Identification number	Type*	Make	Year	Fuel*	Unladen weight	Declared combined gross weight	Axles/ Seats	Y/N ***	Name of owner			Date of purchase	Purchase price	Factory price	Less than 10K/miles	Plate	Title	Temp.	License plate number	Carrier responsible for safety of vehicle		Property tax		Y/N **	
											Owned Leased	Leased start date	Leased end date									FEIN/EIN	US DOT number	1 yr.	2 yr.		

▲ **** Action codes:** A - Add vehicle R - Renew vehicle W - Weight change C - Change vehicle
 *** Does truck pull a trailer? ▲ **** Will the control and responsibility for the safety of this vehicle be assigned to a different Motor Carrier during the registration year by lease? ▲**

Deletions The original cab card and license plate must be surrendered on all deleted units within 10 business days in order to transfer fees.		
Equipment number	Plate	VIN

My signature below acknowledges that I understand and will comply with the reporting, payment, record keeping, and license display requirements as specified in the International Registration Plan. I understand that failure to comply with the provisions, shall be grounds for revocation of my registrations in all member jurisdictions. Under penalty of law, I certify, under the penalties of perjury, that the information herein is true, correct, and complete.

Utah Special Fuel/IFTA: I hereby certify that I have qualified with the Utah State Tax Commission and that I will make reports as required, under the federal identification number listed on this form.

****Fuel Key:** D-Diesel G-Gasoline GH-Gasohol N-Natural P-Propane
****Type key:** BS-Bus C-Cement Pumper CG-Converter Gear CR-Crane DB-Double Bottoms DT-Dump Truck LG-Log Truck
 RT-Road Tractor TK-Truck (single) TL-Full-Trailer or Semi-Trailer TR - Tractor TT-Truck/Tractor W-Wellborer WK-Wrecker/Tow Truck

Signature of person completing application _____ Date signed _____

JURISDICTION USE ONLY

HVUT verified _____

I/M verified _____