Permits Plus Inc. Unified Carrier Registration Application

USDOT #	MC#		FF#	
Legal Name				
DBA Name (If Applicable)				
Email Address	,			
Federal Tax ID #				
Principle (Physical) Address				
	eet	City	State	Zip
Mailing Address				
PO Box		City	State	Zip
Phone Number	F	ax Number_	,	
Classification: Check all that () Motor Carrier - For Hire () Motor Carrier		()Broker	
() Freight Forwarder ()	Leasing Company	/		
Number of Motor vehicles O Complete One Box Only	perated:			
() The number of vehicles sho MCS 150 (USDOT Number appl			rom Section 2	26 of your last
() The number of vehicles sho month period ending June 30,		number owr	ned or operate	ed for the 12
# of Straight Trucks & or Tract	ors			
Are any of the above noted veh	nicles used in INT	RASTATE	ONLY? (with	in state lines)
Number of above noted vehicle	s used exclusivel	y in Intras t	tate Comme	rce
Certification:				
Print Full Legal Name:				
Signature:	Positi	on:		
-		Owner-Pa	rtner-Presiden	t-Vice President

2024 UCR Fee Schedule:

Broker/Freight Forwarder/Leasing Co:

\$136.00 for check, \$137.85 for credit card

Motor Carriers:

1-2 Vehicles: \$136.00 for check, \$137.85 for credit card **3-5 Vehicles:** \$210.00 for check, \$215.55 for credit card **6-20 Vehicles:** \$320.00 for check, \$331.05 for credit card **21-100 Vehicles:** \$868.00 for check, \$906.45 for credit card

101-1000 Vehicles: \$3,769.00 for check, \$3,954.50 for credit card

1001 or more Vehicles: \$35,935.00 for check, \$37,726.80 for credit card

1HR SERVICE ADD \$40.00

2023 UCR Fee Schedule:

Broker/Freight Forwarder/Leasing Co:

\$140.00 for check, \$142.05 for credit card

Motor Carriers:

1-2 Vehicles: \$140.00 for check, \$142.05 for credit card **3-5 Vehicles:** \$220.00 for check, \$226.05 for credit card **6-20 Vehicles:** \$341.00 for check, \$353.10 for credit card **21-100 Vehicles:** \$943.00 for check, \$985.20 for credit card

101-1000 Vehicles: \$4,123.00 for check, \$4,324.20 for credit card

1001 or more Vehicles: \$39,388.00 for check, \$41,352.45 for credit card

1HR SERVICE ADD \$40.00

Credit Card Authorization
() Visa () Mastercard () American Express
Credit Card Number:
Expiration Date: Amount:
Name on Credit Card:CV CODE
Authorized Signature:
Bank Draft Authorization If you wish to have funds directly taken from your checking or savings account, please fill out the following information:
Bank Routing #
Bank Account #
Checking or Savings (circle one)
Authorized Signature
After completing the application, mail or fax to: Permits Plus Inc. P.O. Box 557 8128 Lee Hwy Troutville, Virginia 24175-0557
1-877-722-8059

Fax (540) 966-2175