

APPLICATION FOR OPERATING AUTHORITY AS A COMMERCIAL MOTOR CARRIER
 Wyoming Department of Transportation
 REGULATORY SECTION
 5300 BISHOP BLVD.
 TELEPHONE (307) 777-4850 CHEYENNE, WY 82009-3340 FAX (307) 777-4772

DOCKET NO.: _____ (Office Use Only)

A \$50.00 FILING FEE MUST BE INCLUDED WITH THIS APPLICATION IF SEEKING CONTRACT OR PRIVATE AUTHORITY, OR A COMBINATION OF THE TWO.

PRINT OR TYPE:

Applicant: Personal name or Corp or LLC name _____

TRADE NAME or d/b/a: _____

MAILING ADDRESS: _____ CITY: _____ ST: _____ ZIP: _____

PHYSICAL ADDRESS: _____ CITY: _____ ST: _____ ZIP: _____

TELEPHONE NO.: _____ FAX NO.: _____ CELL NO.: _____

FEDERAL ID NO. or SS NO. _____ U.S. DOT NO. _____ * Email address _____

The applicant understands the difference between a private and a contract motor carrier, and proposes to operate safe motor vehicles in Wyoming as a: PRIVATE CARRIER and/or CONTRACT CARRIER.

The applicant will transport: PROPERTY and/or PASSENGERS HOUSE TRAILER/ MOBILE HOME TOWING/RECOVERY VEHICLE WRECKER INSPECTION INCLUDED

The applicant will be the sole owner and in control of the transportation operations herein proposed; the applicant is

AN INDIVIDUAL A PARTNERSHIP A LIMITED LIABILITY CO. A CORPORATION

If a corporation, incorporated under the laws of the State of _____ on _____ 20____.

The applicant is a 'partnership, association, or corporation, list names of all partners or principle officers.

NAME	TITLE	ADDRESS

COMPLETE IF SEEKING PRIVATE CARRIER AUTHORITY FOR UNITS IN EXCESS OF 26,000 LBS. GROSS VEHICLE WEIGHT. (HAULING OWN PROPERTY OR EMPLOYEES)

- Describe the nature or character of the business or commercial enterprise requiring the use of a motor vehicle and the commodities transported as a private motor carrier.

COMPLETE IF SEEKING A CONTRACT CARRIER AUTHORITY (INTRASTATE CONTRACT HAULING).

- 2. Name specifically the commodities you intend to transport for compensation or passengers. We also need the number of passengers you can transport including the driver for taxi's, shuttles, or buses (fishing, hunting or tour guides). Eight passengers including the driver must have a USDOT number.

Please refer to W.S. 31-18-201 (a)(b)(c) to determine Wyoming State Registration requirements for your vehicle (s). Refer to <http://legisweb.state.wy.us/statutes/statutes.aspx?file=titles/Title31/T31CH18.htm>

If you would like a copy of the Rules and Regulations Governing Motor Carriers, please access the internet at http://www.dot.state.wy.us/wydot/site/wydot/Motor_Carrier Click on Chapter 1, Motor Carriers. If you do not have access to the Internet please call 307-777-4161.

I, the applicant, understand that the filing of this application does not, in itself, constitute authority to operate. I agree to notify the Department of Transportation immediately of any changes of address, legal ownership, commodities transported, operation or territory in the event this application is granted in whole or in part.

I hereby certify that the information, facts and statements made above are correct and acknowledge that false information could lead to revocation of any authority granted.

Submitted this _____ day of _____, 20_____.

By _____

Applicant Signature

Authorized Agent of Applicant

NOTE: INSURANCE REQUIREMENTS FOR INTRASTATE FOR-HIRE CONTRACT AUTHORITY:

All contract operating authority requires liability insurance filings (**Form E**) prior to the authority being approved. The required amount of coverage of \$500,000 combined single limit (CSL). That amount must be typed in the upper left corner of the Form E filing.

All contract operating authority requires cargo insurance filing (**Form H**) prior to the authority being approved. The required amount of coverage is \$10,000. That amount (or greater, if more insurance is carried) must be typed in the upper left corner of the Form H. All contract operating authority transporting mobile homes require cargo insurance filings (**Form MC-61E**) prior to the authority being approved. The minimum required amount of coverage is \$5,000. Cargo insurance IS NOT required for the transportation of the following commodities: Raw agricultural products (except livestock), sand, (not in pneumatic trailers), rock, dirt, gravel, or commodities which have no appreciable salvage value. **Insurance underwriter filings can be scanned, then attached to email & sent to: mvs@wvo.gov**

We accept Credit cards but account numbers & expirations MUST be called in to our office 307-777-4850. For all Credit card purchases, there will be a Vital Check handling fee of \$2.50.

If mailing application and sending Check, Make Check payable to WYDOT in the amount of \$50.00.

BOTH page 1 & 2 must be returned before Authority can be issued. Sign & date Page 2 of application.

A fee of \$50.00 is required for a name change and \$10.00 for a Duplicate letter. No fee for address Update only.