

MOTOR CARRIER PERMIT APPLICATION INSTRUCTIONS

The instructions provided below are a guide designed to assist you when completing your application for a Motor Carrier Permit (MCP). This guide provides answers to the most commonly asked questions regarding the application. If you need assistance completing or have questions regarding this application, call the MCP Unit at (916) 657-8153. Mail your completed application to the address shown on the application.

MOTOR CARRIER (CA) #:

The CA # is used as the MCP identification # and is issued by the California Highway Patrol (CHP).

- If you do not have a CA #, write ‘**NONE**’ in the box, DMV may issue you a CA # on behalf of the CHP.
- If you have applied for a CA # from the CHP and have not yet received it, write ‘**PENDING**’ in the box.
- If you are not sure if you have a CA #, please contact the Department of the California Highway Patrol (CHP).

TYPE OF APPLICATION:

When completing this section, place an ‘**X**’ in the appropriate box.

- **Original** – Select this box if you are **new** to the MCP program.
- **Reinstatement** – Select this if you are **reactivating** a permit after a Voluntary Withdrawal, Suspension, or Revocation.
- **Renewal** – Select this box if you **did not receive or cannot find your** renewal notice.
- **Seasonal** – Select the appropriate box as shown below if you are a seasonal motor carrier who will be operating for no less than 6-months and not more than 11-months during a 12-month permit term.
 - ☛ **Original** – Select this box if you are applying for a seasonal permit for the first time or when your seasonal permit period has expired.
 - ☛ **Extension** – Select this box when you are extending a Seasonal MCP permit. This is be used to extend an existing permit up to 11-months. **Example:** You applied for a permit for six months. You now want to add three additional months. This may be done so long as the additional months do not add-up to more than 12-months from the beginning of your assigned permit term.
 - ☛ **Note:** If the extension, in combination with a Seasonal Original application, will result in a combined total of more than 11-months, fees for a full-year MCP permit term will be required. Mark all the months that apply.

PART 1 – OPERATING STATUS (Please mark the box that describes your operation):

- **Individual** – You are considered an Individual if you are the sole owner of a business entity and are not a corporation, partnership, or association.
- **Owner Operator** – You are considered an Owner Operator if you hold a class A or B driver license or class C driver license with a hazardous materials endorsement and do not own, lease, or otherwise cause to be operated not more than one (1) power unit and not more than three (3) towed vehicles [California Vehicle Code (CVC) section 34624].

PART 2 – CARRIER IDENTIFICATION (Please complete the appropriate boxes):

- Individuals – You are required to provide your full name along with your driver license number and state issued or your Federal Employer Identification Number (EIN) if you employ drivers.
- Owner Operators – You must provide your full name along with your driver license number and state issued.
- Corporations and LLCs – You must provide your corporate or LLC number, state of incorporation, and date incorporated.
 - ☛ You must provide the company name, general manager or partner, and authorized representative name/ title.
- The EIN is required for all Corporations, LLC's, and Partnerships.
- We are looking forward to being able to electronically correspond with our customers in the future. Your E-MAIL address is optional.

PART 3 – DOING BUSINESS AS (DBA) AND TRADE NAMES:

- DBA names that are fictitious business names shall not be included on the application unless they are adopted in compliance with the Business and Professions Code, commencing with Section 17900. Companies that are incorporated (e.g.: ABC Trucking Corp. or ABC Trucking Inc.) cannot be listed as DBAs.

PART 5 – TRANSPORTATION ACTIVITIES:

- You do not need to apply for a MCP Permit **if marking 'A', and you have an exclusive contract with the U. S. Postal Service, and do not transport any other property.**
- If you mark 'D', you must **also** mark E, F, G, H, I, T, U, or V.
- **If you do not mark any activities, your incomplete application will be returned to you with a letter requesting the additional information, and a permit will not be issued until the properly completed application is returned to DMV.**

PART 6 – TYPE OF VEHICLES:

- **If you do not mark any vehicles, your incomplete application will be returned to you with a letter requesting the additional information, and a permit will not be issued until the properly completed application is returned to DMV.**

PART 7 – OPERATING IDENTIFICATION NUMBERS:

- You **are** required to provide all other operating identification numbers issued to you (ICC, DOT, PUC, etc.).
- If you have interstate operating authority, you must also list the intrastate miles (miles traveled exclusively in California) and the total interstate miles traveled during the last permit year separately. If this is a new business without prior operations, use the estimated mileage from the IRP Schedule B form. **You must provide the US DOT # assigned to you, if this is a renewal application.**
- **If you do not provide your other identification numbers, your incomplete application will be returned to you with a letter requesting the additional information, and a permit will not be issued until the properly completed application is returned to DMV.**

PART 8 – BIT AND CSAT:

- You are required to be enrolled in the Biennial Inspection of Terminals (BIT) program pursuant to CVC section 34501.12, unless you are 'EXEMPT'. If you are not sure if you should be enrolled in the BIT program, contact the CHP office.
- You are required to be enrolled in a Controlled Substances and Alcohol Testing (CSAT) program pursuant to CVC section 34520, unless you are 'EXEMPT'. If you are not sure if you are required to be enrolled in a CSAT program, contact the CHP.

PART 9 – EMPLOYER PULL NOTICE (EPN) PROGRAM:

- You are not required to enroll in the EPN program **if** your operation does not have **any** terminals located within California.
- If you employ family members, or other drivers who are required to have a Class A, Class B, or Class C with a Hazardous Materials endorsement, who drive for your operation, you **are required** to enroll in the EPN program and enroll all drivers under the requestor code # assigned to you.
- If you are an Owner Operator (as defined in PART 1), MCP will enroll you in the EPN program under the requestor code # assigned to MCP.
- If you require enrollment forms, to apply for an EPN requestor code #, or have any questions regarding the EPN program, please call (916) 657-6346 or access the EPN web page via the DMV web site at WWW.DMV.CA.GOV.
- **If you do not provide your EPN requestor code #, or certify that you are not required to be enrolled in the EPN program, your incomplete application will be returned to you with a letter requesting the additional information, and a permit will not be issued until the properly completed application is returned to DMV.**

PART 10 – VEHICLES OPERATED:

- You are required to provide the number of vehicles used in your operation.
- You are required to provide a listing of your vehicles, listing the license plate number, state issued, and the complete vehicle identification number.
- **If you do not provide this information, your incomplete application will be returned to you with a letter requesting the additional information, and a permit will not be issued until the properly completed application is returned to DMV.**

PART 11 – EMPLOYEES (REINSTATEMENT OR RENEWAL APPLICANTS ONLY):

- As it applies to MCP, 'All employees' only refers to mechanics, drivers, and Owner Operator drivers hired or engaged during the previous reporting period. If you need additional space, attach an 8 ½" x 11" sheet of paper.

PART 12 – WORKERS' COMPENSATION:

- You **are required** to show proof of Workers' Compensation Insurance if you employ drivers (including friends and family members who drive for you).

PART 13 – CERTIFICATION:

- **If you submit your application without a signature, your application will be returned to you with a letter requesting the additional information, and a permit will not be issued until the signed application is returned to DMV.**

PART 14 – LIABILITY INSURANCE REQUIREMENTS:

- Your insurance company must submit the Certificate of Insurance [DMV 65 MCP (Rev. 7/2002)] directly to DMV.
- Activity B in Part 5 can qualify under any of the insurance limits depending on the type of property transported and the Gross Vehicle Weight Rating (GVWR) of the vehicle(s).
- **A permit will not be issued until proof of Liability Insurance has been received from your insurance company.**
- Below is a chart to help you determine the level of liability insurance required based upon the transportation activities you marked in Part 5.

ACTIVITY	IF YOU TRANSPORT...	THEN YOU MUST CARRY...
B OR V	Property, other than hazardous materials, in vehicles under 10,000 pounds gross vehicle weight rating (GVWR) transported by for -hire carriers only.	\$300,000 combined single limit (CSL) coverage.
B or U	Property, other than hazardous materials, in vehicles 10,000 or more pounds GVWR.	\$750,000 CSL coverage.
B, C, D, or I	Any quantity of hazardous materials not subject to a higher minimum coverage.	\$1,000,000 CSL coverage.
B or E	Oil listed in Section 172.101 of Title 49 CFR (H/M Table).	\$1,000,000 CSL coverage.
B or F	Non-RCRA hazardous waste (California-regulated only).	\$1,000,000 CSL coverage.
B or T	Petroleum products in bulk.	\$1,200,000 split limits or CSL coverage.
B or G	Hazardous substances as defined in 171.8 of Title 49 CFR in cargo tanks, portable tanks, and hopper vehicles in excess of 3,500 water gallon capacity.	\$5,000,000 CSL coverage.
B or G	Division 2.1 or 2.2 gases in cargo tanks or portable tanks in excess of 3,500 water gallon capacity.	\$5,000,000 CSL coverage.
B or H	Any quantity of Division 2.3 gas, Hazard Zone A (poison gas).	\$5,000,000 CSL coverage.
B or H	Highway route controlled quantities of radioactive materials.	\$5,000,000 CSL coverage.
B or H	Any quantity of 1.1, 1.2, or 1.3 explosives.	\$5,000,000 CSL coverage.

PARTS 15 & 16 – FEE CALCULATIONS AND CHARTS:

- Complete Part 14 if you wish to pay prorated fees based on intra/interstate mileage.
- To determine the fees required for Full-Year and Seasonal intrastate operations, use the charts as shown.

PART 12: WORKERS' COMPENSATION

If you employ any person(s) in your carrier operations that subject you to the Workers' Compensation laws of California, then proof of Workers' Compensation insurance must be filed. Acceptable forms are:

- A Certificate of Insurance (DMV 65 MCP (REV. 7/2002)) submitted by your insurance provider.
- A Certificate of Insurance (SCIF 10262 or SCIF 10265) submitted by the State Compensation Insurance Fund or
- A Certificate of Consent to Self-Insure issued by the Director of the Dept. of Industrial Relations.

A. If final judgement in a Workers' Compensation case has not been entered against you, check this box.

I certify that a final judgement has not been entered against my operation pursuant to section 3716.2 of the California Labor Code (Workers' Compensation violations).

B. If you qualify for a Workers' Compensation exemption, check this box.

I certify that I do not employ any person(s) in a manner so as to become subject to the Workers' Compensation laws of California.

PART 13: CERTIFICATION *Must be completed in full.*

The person signing the certification must be the individual, owner/operator, general partner, principal corporate officer, or principal LLC member or manager or authorized employee shown on page 1.

I certify under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

DATE	SIGNED AT (CITY)	SIGNATURE X
TITLE	PRINTED NAME OF PERSON SIGNING	

Please include your payment with the application. Make your check or money order payable to the Department of Motor Vehicles. If your check is not honored by the bank, a \$30 dishonored check fee will be assessed and your permit may be cancelled. Contact the Motor Carrier Permit Branch at (916) 657-8153 should you have any questions.

Completed application must be mailed to:

**DEPARTMENT OF MOTOR VEHICLES
MOTOR CARRIER PERMIT BRANCH MS: G875
P.O. BOX 932370
SACRAMENTO, CA 94232-3700**

PART 14: FEE CALCULATIONS — To determine fees, follow the steps below based on the appropriate category.

A. FULL YEAR INTRASTATE CARRIERS (*Only doing business in California*)

Select the chart on the next page that applies to your operation (either Private or For-Hire), then locate your fleet size. The amount you owe is located next to the appropriate fleet size on the chart.

EXAMPLE: A For-Hire carrier with a fleet of 15 power units owes \$710.

B. FULL YEAR INTER/INTRASTATE CARRIERS (Doing business in more than one state.)

1. Follow the instructions shown above (Section A) and enter the amount. \$ _____
2. Enter total intrastate (**California**) miles* as shown in part 7 of application. _____
3. Enter **total** Interstate mileage (**this includes California mileage**) as shown in part 7 of application. ÷ _____
4. Divide the California miles by Interstate miles (lines 2 and 3) and enter the resulting California mileage percentage. _____ %
5. Multiply the original fee amount shown on line 1 by the California mile percentage from line 4 to obtain amount due. \$ _____

EXAMPLE: $\frac{\text{Total CA MI}}{\text{Total MILES}} \div = \text{_____ \%}$

_____ % X **\$ FEES DUE = \$ AMOUNT OWED**

*For interstate and foreign motor carriers of property, enter the fleet miles traveled in California in intrastate commerce. In the absence of records to establish intrastate fleet miles, enter the total fleet miles traveled in California (those derived from interstate and intrastate moves).

C. SEASONAL INTRASTATE CARRIERS

See the seasonal chart on the next page. Locate the number of months the permit will cover on the top row of the chart and the fleet size on the left to determine the fees due.

D. SEASONAL EXTENSION

1. Locate the fee due per month of extension from the last column of the chart on the next page. Multiply that amount times the number of months the permit is being extended.
2. Add \$5.00 to the amount identified on line 1 of this section. This is the amount you owe.

EXAMPLE: $\frac{\text{Extension fee per month based on fleet size}}{\text{extended}} \times \# \text{ of months} + \$5 = \text{fee due.}$

FEE CHARTS FOR FULL YEAR PERMITS

FOR HIRE MOTOR CARRIER FEE CHART		PRIVATE MOTOR CARRIER FEE CHART	
Fleet Size	Fees	Fleet Size	Fees
1	\$ 120	1-10	\$ 35
2-4	200	11-20	240
5-10	475	21-35	325
11-20	710	36-50	430
21-35	975	51-100	535
36-50	1,310	101-200	635
51-100	1,610	201-500	730
101-200	1,935	501-1000	830
201-500	2,240	1001-2000	930
501-1000	2,545	2001 & Above	1,030
1001-2000	2,830		
2001 & Above	3,030		

FEE CHART FOR SEASONAL PERMITS

The minimum permit period allowed is six months and the maximum is eleven months. The original seasonal permit issued may be extended should you need to operate for additional months beyond those indicated in this application. For each extension request, a \$5 fee is required along with an additional fee portion for each additional month per Revenue & Taxation Code Section 7236 (a) (3).

Fleet Size	6-Months	7-Months	8-Months	9-Months	10-Months	11-Months	Extension Request Fee	Extension Fee Per Month
1	\$ 90	\$ 95	\$ 100	\$ 105	\$ 110	\$ 115	\$ 5	\$ 5
2-4	141	152	163	174	185	196	5	11
5-10	338	361	384	407	430	453	5	23
11-20	480	520	560	600	640	680	5	40
21-35	655	710	765	820	875	930	5	55
36-50	874	948	1,022	1,096	1,170	1,244	5	74
51-100	1,075	1,165	1,255	1,345	1,435	1,525	5	90
101-200	1,289	1,398	1,507	1,616	1,725	1,834	5	109
201-500	1,486	1,612	1,738	1,864	1,990	2,116	5	126
501-1000	1,688	1,831	1,974	2,117	2,260	2,403	5	143
1001-2000	1,884	2,043	2,202	2,361	2,520	2,679	5	159
2001 & Above	2,032	2,199	2,366	2,533	2,700	2,867	5	167

NOTE: The above fee schedules should be used for original MCP applications with an effective date on or after January 1, 2001, and for renewal MCP applications with a term expiration date on or after December 31, 2000.