

Personal information is collected for the purpose of administering the International Registration Plan and is collected under the authority of Freedom of Information and Protection of Privacy Act section 33(c). Questions regarding the collection may be directed to the Prorate Office at (403) 297-2920.

**Prorate Services** 

1st Floor, 803 Manning Road NE Calgary, AB Canada 72E 7M8 Telephone (403) 297-2920 Fax (403) 297-2917



# Prior to travelling in any jurisdiction ensure you have all the requirements of that jurisdiction.

Prorate only covers the registration of vehicles. For additional jurisdictional requirements, please contact the respective jurisdiction. Phone numbers are in the Prorate Guide.

Canada	International Fuel Tax Agreement (IFTA) license or Fuel Permit required. IFTA: (780) 427-3044					
Other requirements:						
АВ	Vehicles weighing in excess of 4500kg; or vehicles with a seating capacity originally designed for 11 or more persons are required to have a Safety Fitness Certificate (SFC) with a "Federal" operating status. First time registrants for vehicles with a weight of 11,794 kg or greater may obtain a sixty (60) day temporary SFC from a registry office. Clients registering a vehicle 4,501 - 11,793 kg must complete and submit an application for a Safety Fitness Certificate at http://www.transportation.alberta.ca/638.htm or Call Carrier Services at (403) 340-5444 for more information. Passenger carrying vehicles may also require an operating authority certificate. For more information contact Carrier Services.					
ВС	Financial Responsibility Number required for vehicles with a weight of 8200 kg or more.					
ON	Buses may require an operating authority. Contact the Ontario Highway Transport Board at (416) 326-6732.					
QC	Clients doing business in Quebec need to register with Registraire des Enterprises Quebec at (877) 644-4545.					
NB	Trucks are required to have proof of \$1 million in public liability and damage insurance. (\$2 million required if carrying dangerous goods.)					
	IRP Cross Border Requirements: <a href="http://www.irponline.org/?page=CrossBorderReq">http://www.irponline.org/?page=CrossBorderReq</a>					
	Department of Transportation (USDOT) number is mandatory when travelling into the U.S. Contact the Federal Motor Carrier Safety Administration (FMCSA) at (207) 624-9000 or <a href="www.fmcsa.dot.gov">www.fmcsa.dot.gov</a> .					
US	Unified Carrier Registration is required (UCR). If you have any questions contact Montana IRP office at (406) 444-2998 or www.ucr.in.gov					
	U.S. Federal Heavy Vehicle Use Tax – applicable on vehicles with a gross vehicle weight of 24,948 kgs/55,000 lbs and greater. Form 2290 may be obtained online at <a href="www.irs.gov/trucker">www.irs.gov/trucker</a> .					

**NOTE:** A *Fee Estimator* to help estimate prorate fees is available at

http://www.irponline.org/InfoExchange/FeeEstimator/.

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#### **AGREEMENT TO MAINTAIN RECORDS**

#### IN ACCORDANCE WITH PRORATED REGISTRATION RECORD-KEEPING REQUIREMENTS

Any client filing an application for prorated registration must maintain records to support the information reported on the application. The International Registration Plan (IRP) (*Article X – Records and Audits*) requires that distance records (*July 1 to June 30*) and other documents be retained for four years. IRP requires that records be made available to auditors upon request. In the event the registrant fails to provide adequate records Alberta will impose an assessment of twenty percent (20%) for the first offense. For second offence, fifty percent (50%), and third offense, one hundred percent (100%). For a description see the Alberta Prorate Information Guide or the IRP Agreement Article X - Section 1015 - Inadequate Records Assessment. (effective July 1, 2013)

For Canada Customs and Revenue Agency (CCRA) Income Tax purposes all records must be retained for six years.

#### DOCUMENTS TO BE MAINTAINED

Detailed record-keeping information, requirements and sample forms are included in the Prorate Information Guide. This information is subject to change. For updated information please visit our web site. <a href="http://www.transportation.alberta.ca/">http://www.transportation.alberta.ca/</a>
A training video that instructs carriers on the importance of record keeping can be found on the IRP web site <a href="http://www.irponline.org/Education/TrainingVideo/">http://www.irponline.org/Education/TrainingVideo/</a>.

The following paragraphs briefly describe the documents required:

**Distance Documentation:** Each trip must be supported by vehicle records (a driver's trip sheet, driver's log or a tracking system such as one based on GPS) that contains the following information:

For manual and other records - 1) Date of trip (beginning and ending), 2) Trip origin and destination, 3) Routes (highway numbers) traveled, 4) Odometer/hubometer readings, 5) Distance in each jurisdiction, 6) Total trip kilometres, 7) Vehicle equipment number or identification number (for power unit and trailer).

For a vehicle tracking system – 1) GPS or location data reading at trip origin, 2) Date and time of each reading, 3) Location of each reading, 4) Trip start and ending odometer/hubometer or engine control module readings, 5) Calculated distance between each reading, 6) Route of travel, 7) Distance traveled in each jurisdiction, 8) Total trip kilometres, 9) Vehicle equipment number or identification number (for power unit and trailer).

Monthly, quarterly and annual distance summaries must also be maintained. A summary of Fleet's operations for each month will include the distance traveled in total by each vehicle and the distance traveled in each jurisdiction by each vehicle. A summary of the Fleet's operation for each calendar quarter will include both the full distance traveled and the distance traveled in each jurisdiction by the vehicles in the Fleet for that quarter. An annual distance summary will summarize the quarterly summaries.

**Vehicle Cost Documentation:** Purchase invoice, bill of sale and/or master lease agreement which itemize the full purchase price, capitalized cost (including accessories and destination charges) of each vehicle.

DECLARATION: The undersigned acknowledges the requirements under the IRP to maintain records supporting their prorate application.

NOTICE: an authorized company employee, not a licensing agent, must sign this Declaration.

COMPANY NAME		PHONE	ACCOUNT NUMBER / or MVID
CITY	PROV / STATE		DATE
AUTHORIZED COMPANY EMPLOYEE NAME (PRINT)	SIGNATURE		TITLE

Revised: May 30, 2013



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## **ESTABLISHED PLACE OF BUSINESS QUESTIONNAIRE**

Section 305 of the International Registration Plan (IRP) requires Applicants to maintain an Established Place of Business and/or **Residence** in the jurisdiction where they base plate <a href="http://www.irponline.org/publications/theplan">http://www.irponline.org/publications/theplan</a> .

Name of Company/Applicant:						
Contact Individual: Phone No.	ımber:					
Address:						
(Must be a street address or legal land location. Not a box number.)				_		
Are everyday operations conducted from this location?	Yes		No			
• If no, where?						
Are the Operational Records (Including NSC requirements) kept at this location?	Yes		No			
If no, where are the records maintained?						
Have you previously been prorated?	Yes		No			
• If yes, where?						
The following requirements must be met in order to qualify for apportioned registration in Alb						
1. The Applicant has an <b>Established Place of Business</b> and/or can demonstrate <b>Residence</b>	ın Alb	erta.				
2. The fleet will accumulate distance in Alberta.						
3. The IRP records are kept or made available at the Alberta physical location.						
Established Place of Business						
A physical structure located within Alberta that is occupied by the Applicant. This physical st		_				
staffed during regular business hours by at least one person employed by the Applicant on a p	ermane	nt basis for t	he pu	rpose		
of the Applicant's trucking-related business.						
What are your business hours?						
Are trucks dispatched from this location?	Yes		No			
• If no, where?						
Does your company employ Albertans?	Yes		No			
• If yes, how many?						
You must include the following backup document; Plus two items from 'Residence' below.						
A copy of the lease, mortgage or current property tax notice for the physical business a	ddroee	usad in Alba	rto			
A copy of the lease, mortgage of current property tax notice for the physical business a	uuress	useu III Aibe	ııa.			
Residence						
An Applicant that does not have an Established Place of Business may demonstrate Residence	e by pro	viding at lea	ast th	ree of		
the following: (Section 305)	• •	•				
if the Applicant is an individual on Alberta driver's license						
if the Applicant is an individual, an Alberta driver's licence						
if the Applicant is a corporation, that it is incorporated in Alberta	**					
that the Applicant's federal income tax returns have been filed from an address in Alberta						
that the Applicant has paid personal income taxes to Alberta						
that the Applicant receives utility bills in Alberta in its name						
A SITE VISIT MAY BE CONDUCTED TO VERIFY COMP.	LIAN	CE				
I/we, the undersigned, do hereby certify, that the statements made herein are true and correct.						
Signature	Date					



1st Floor, 803 Manning Road NE Calgary, AB

Telephone (403) 297-2920 Fax (403) 297-2917 Email prorate@gov.ab.ca

#### **New Client Applications –** The following is required for first time applicants:

#### 1. Agreement to Maintain Records

The Agreement to Maintain Records form outlines record requirements. For more information see Audit Requirements in the Prorate Information Guide.

#### 2. Established Place of Business Questionnaire

This is used to determine if the client qualifies for Prorate in Alberta. Clients can either demonstrate they have an office in Alberta (established place of business) or that they live in Alberta (residence). Prorate requires 3 backup documents showing the address; as outlined on the Questionnaire.

#### 3. Distance - Form 1

This form shows address, contact info, operation type and distance. The operation type can either be For Hire, Private, or Daily Rental. Refer to the Prorate Guide for details on Operation Type. Distance is used to apportion the percentage of fees paid to each jurisdiction. Instructions provided.

#### 4. Vehicle - Form 2

Vehicle information from sections A, B and C are used to calculate fees. Prorate requires ownership documents, see Backup sheet. Instructions provided.

## 5. Weight - Form 3

This form shows the registered weight in each jurisdiction. Weight Group Number on the top right corner is assigned by the client, which is used to assign the group of weights to vehicles. For example, if Weight Group No. is 1 any vehicle assigned to weight group 1 will have the weights shown on that Weight-Form 3. The fleet may have as many weight groups as required. Instructions provided.

All of the above forms are on the Prorate website <a href="http://www.transportation.alberta.ca/3182.htm">http://www.transportation.alberta.ca/3182.htm</a>.

Prorate application training is available in Calgary free of charge to clients. Contact Prorate Services to arrange for an appointment. Assistance is always available over the phone during business hours. 8:15am - 12:00pm and 1:00pm - 4:30pm Monday thru Friday except for Holidays.

To call toll-free in Alberta dial 310-0000 then (403) 297-2920.

# \* To ensure timely processing make sure to send all emails to prorate@gov.ab.ca or fax to 403-297-2917

(Please do not send to clerk's individual email)

## **❖ INSTRUCTIONS FOR COMPLETING DISTANCE – FORM 1 ❖**

For more information see related topics in the Prorate Information Guide or call Prorate Services

**Client Name** – Name of the individual(s) or a company that is registered with Alberta Corporate Registry.

Mailing Address – where correspondence could be mailed.

**Physical Address** – must be located in Alberta. Post office box numbers are not accepted.

Trade Name, Operating As (O/A), or Doing Business As (DBA) - Enter only if applicable

**Contact Information** – Person responsible for completion of the forms.

Name, Phone, Fax and Email

IRP Account – New clients leave blank. Number is assigned by Prorate Services.

Fleet No. – Identifies the fleet that is to be registered. Fleets are numeric starting at 1.

Fleet Year - New clients leave blank.

**Supp. No.** – Supplements are numeric starting at 1. If unknown, leave blank.

**Effective Date** – Provide the date you want the application to take effect.

Expiry Date - For office use only.

**MVID** – **M**otor **V**ehicle **Id**entification number. If unknown leave blank.

Type of Requested Service - Check one type of service:

**New Fleet** – Applying to prorate as a new client or adding an additional fleet.

Renewal - Renewing an existing fleet.

Address and/or Name Change – Complete top section only.

**Operation Type** – Check one type of operation:

**For Hire** – Transporting someone else's goods and/or property.

**Private** – Transporting own goods and/or property.

**Daily Rental** – Using vehicles on a daily rental basis.

#### **Distance Information**

New Clients are not required to fill out distance unless they have actual distance.

NT, NU, YT and AK record actual distances only. MX leave blank.

#### Insurance

**Company Name** – Not the agent/broker.

**Policy No.** – Third party liability.

**Expiry Date** – Must be after the effective date of application.

**Declaration** - Signature and date required.

# **Backup Documents Required for Application**

Agreement to Maintain Records - New clients only.

Established Place of Business Questionnaire – New clients only.

**License Agent Contract** – Submit a contract if a consultant has been hired to complete and submit your Prorate applications.



# Distance - FORM 1

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Client Name		Contac	t Information		IRP Account A	В
Mailing Address Physical Address		Name			Fleet No.	
		Phone			Fleet Year	
		Fax			Supp. No.	
		Email			Effective Date	
					Expiry Date	
Trade Name, Operating As (O/A), or Doing	Business As (DBA)				MVID (Motor Vehicle ID	))
Type of requested service - Check one	<del>)</del>				Operation Ty	<b>pe -</b> Check one
☐ New Fleet Fill in kilometer column	only if unit(s) have ha	ad actual Prorate trav	rel		☐ For Hire	
	ly when you are unable				☐ Private	
☐ Address and/or Name Change		·			— ☐ Daily Renta	al
_						•
*Actual Travel Only* Complete the follow			_			
Jurisdiction Kilometers	Jurisdiction	Kilometers	Jurisdiction	Kilometers	Jurisdiction	Kilometers
AB Alberta	CA California		MI Michigan		RI Rhode Island	
BC British Columbia	CO Colorado		MN Minnesota		SC South Carolina	
MB Manitoba	CT Connecticut		MO Missouri		SD South Dakota	
NB New Brunswick	DC Dist of Columbia		MS Mississippi		TN Tennessee	
NL Newfoundland	DE Delaware		MT Montana		TX Texas	
NS Nova Scotia	FL Florida		NC North Carolina		UT Utah	
ON Ontario	GA Georgia		ND North Dakota		VA Virginia	
PE Prince Edward Is.	IA Iowa		NE Nebraska		VT Vermont	
QC Quebec	ID Idaho		NH New Hampshire		WA Washington	
SK Saskatchewan	IL Illinois		NJ New Jersey		WI Wisconsin	
NT Northwest Terr X	IN Indiana		NM New Mexico		WV West Virginia	
NU Nunavut X	KS Kansas		NV Nevada		WY Wyoming	
YT Yukon X	KY Kentucky		NY New York			
AK Alaska X	LA Louisiana		OH Ohio		MX Mexico	X
AL Alabama	MA Massachusetts		OK Oklahoma			
AR Arkansas	MD Maryland		OR Oregon		Total Fleet Distance	
AZ Arizona	ME Maine	tration Plan Vmla ab	PA Pennsylvania	tual traval was seemed		
*Jurisdictions with an X do not belong to	tne international Regis	tration Plan. Kms sn	ouia stiii be enterea ii act	tuai travei was accrued.		
Insurance: Company Name			Declaration:	The undersigned d	leclares that the info	ormation on this
Policy No.			_	form and the attacl	ned is true and corr	ect.
Expiry Date (YYYY/MM/	DD)		_ Signature			

#### **❖ INSTRUCTIONS FOR COMPLETING VEHICLE – FORM 2 ❖**

For more information see related topics in the Prorate Information Guide or call Prorate Services

For Client Name, Contact Information, IRP Account, Fleet No., Fleet Year, Supp No., Effective Date and MVID see Distance - Form 1 instructions.

## All Sections (A, B, C & D)

**Line No**. – Each section has a corresponding line with the next section. i.e. The vehicle on the first line of Section A would also be the vehicle on the first line of Sections B and C. Delete vehicle requests use Section D only.

#### Section A

**Service Request** <sup>(1)</sup> – Use one of the codes found at the top of the Vehicle - Form 2 to identify which service you require. When service is a transfer (TR) or exchange (EX), indicate the vehicle being removed on the corresponding line in Section D.

Vehicle Identification Number –VIN (Serial Number).

**Colour** – Primary colour of power unit.

**Vehicle Year** – Model year of the vehicle.

**Make** - Vehicle make (i.e. Kenworth, Ford, Peterbilt, etc.).

**Unit Number** – All vehicles must have a unit number assigned by the client (maximum 8 digits).

**Fuel Type** –Diesel, gas, propane, multi-fuel or other.

**Vehicle Type**<sup>(2)</sup> – Use one of the codes found at the bottom of the Vehicle - Form 2.

**Bus Seats** – For bus use only. The factory rated seating capacity.

**Odometer Reading** – Optional.

**Regulation Code**<sup>(3)</sup> – If applicable, use one of the codes found at the bottom of the Vehicle - Form 2.

• For code 12, it is necessary to describe the type of mounted equipment.

## Section B

**Lease Company Name** – If the vehicle is being leased record the name of the leasing company.

**MVID of Lease Company** – MVID of Leasing Company (if unknown leave blank).

**Vehicle Owner Name (or names if owned jointly)** –Individual and/or company other than the registrant. Record all names if owned by more than one person.

**MVID** or Date of Birth –MVID of the owner/operator if known.

• For an individual provide date of birth if MVID is not known.

#### Section C

#### Date of Purchase/Lease – In the format YYYY/MM/DD

#### **Purchase or Capitalized Cost**

- CDN \$ Total purchase price including the cost of Permanently Mounted Equipment (do not include GST, sales tax or tire tax). For leased vehicles this is the capitalized cost or value of vehicle at the time of signing legal documents.
- US \$ Convert the CDN \$ to US \$ using the exchange rate on the date of purchase.

**Exchange Rate** –Exchange rate on the date of purchase/lease (optional).

**Tare Weight** – Empty, unladen or shipping weight of power unit.

**Axles** – Total number of axles on power unit (steering and drive).

**Plate Number** – Do you currently have a plate for the power unit?

- If yes, provide the plate number.
- If no, enter "NEW".

**Commodity Code**<sup>(4)</sup> – Use one of the codes found at the bottom of the Vehicle - Form 2.

Weight Group – Indicate the weight group number that is to be associated with the unit.

(See Weight – Form 3 instructions.)

#### Is Insurance the same as on Distance – Form 1?

- If yes, indicate on form.
- If no, indicate on form and provide a valid copy of insurance to your Registry Agent.

#### Section D - Delete Vehicle Information

When deleting or transferring a vehicle out of the fleet, provide the following information in Section D:

- Vehicle Identification Number
- Plate Number
- Unit Number
- Vehicle Year
- Weight Group

#### \*Describe Mounted Equipment

If using Regulation Code 12 provide a description of the permanently mounted equipment. Photos of side and rear of vehicle may be required. (See Permanently Mounted Equipment and Glossary in the Prorate Information Guide.)

NOTE: For backup documents required see table last page of Prorate Application Instructions.



# **VEHICLE - FORM 2**

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Questions regarding the collection may be directed to the Prorate Office at (403) 297-2920.

Client	Name				Service Request Codes <sup>(1)</sup> AV Add Vehicle					IRP	AB		
Na	ct Informati ame one x	ion 			TR Transfer Vehicle (same plate)  EX Transfer Vehicle (change plate)  CV Change Vehicle Information (colour, unit #, lesson PR Plate Replacement only				Fleet No. Fleet Year Supp. No. Effective Date MVID (Motor Vehicle ID)				
En	nail				WC _ RD	Weight Ch Replace D	_						
Section	1 A				ΚD	Replace D	ocuments						
Line	Service		ntification Number		Colour	Vehicle	Make	Unit	Fuel	Vehicle	Bus	Odometer	Regulation
No.	Request <sup>(1)</sup>	VIN (Serial	Number)		+	Year		Number	Туре	Type <sup>(2)</sup>	Seats	Reading	Code <sup>(3)</sup>
					1								
Section	 1 R												
Line	Lease Comp	pany Name			MVII	O of V	ehicle Owne	er Name (or na	ames if owned	jointly)			MVID or
No.	(only if vehic	-	leased)		Lease C				s/lessees prov		es)		Date of Birth
					+	-							
Section											-		nce the same
Line	Date			capitalized Cost	Exchange			Plate	Commodity	Weight		-	ance-Form 1?
No.	Purchas	e/Lease	CDN \$	US \$	Rate	Weight	Axles	Number	Code <sup>(4)</sup>	Group	-	Yes	No
	_										]		
Section		4:6: 4: NI.		ete Vehicle Infor		\/abiala	\\/ = : = l= 4	Vehicle Typ	oe Codes <sup>(2)</sup>	Regulation			
Line No.	Vehicle Iden VIN (Serial I		imber	Plate Number	Unit Number	Vehicle Year	Weight Group	BS = Bus TR = Truck		*12 = Mour 13 = Bed 7	ited Equipmen ruck	t	
		,						TT = Truck		14 = Fire 7			
								Commodity	/ Codes <sup>(4)</sup>	*Describe I	Mounted Equi	pment:	
								A = All H = Housel	nold				
	I			1		1	1	1					
Date	Date Signature									See Prorat	e Information (	Guide for mor	e information.
Revised	January 2015	5											

## **❖ INSTRUCTIONS FOR COMPLETING WEIGHT – FORM 3 ❖**

For more information see related topics in the Prorate Information Guide or call Prorate Services

For Client Name, IRP Account, Fleet No., Fleet Year and MVID see Distance - Form 1 instructions.

Weight Group No. – Located at the top right hand corner of Weight Form 3

This is a client-assigned number to classify groupings of vehicles that will operate with the same gross vehicle weights within the same jurisdictions (starting with 1, 2, or 3 etc.)

- Put this assigned number on Vehicle Form 2 in section C for each vehicle it applies to.
- You may set up as many different weight groups as needed.

Sample	below	from	Weight f	orm	3
--------	-------	------	----------	-----	---

Enter number in the box below on form 3

Client Name	Weight Group No.	
A weight group shows the maximum Gross Vehicle Weight (GVW) for all jurisdictions.	IRP Account	AB
(1) A GVW must be provided for all jurisdictions listed below,	Fleet No.	
(2) Quebec - Enter the total amount of axles for the vehicle including any trailer(s).	Fleet Year	
(3) See the Prorate Information Guide for a jurisdiction's maximum GVW.	MVID (Motor Vehicle ID)	
(4) Assign a weight group number (top right) and use more than one form if there are units requiring diffe	erent weight groups.	

#### Sample below from Vehicle form 2

Match number above to the vehicle on form 2

Section	n C								<b>—</b>
Line	Date of	Purchase or C	apitalized Cost	Exchange	Tare		Plate	Commodity	Weight
No.	Purchase/Lease	CDN \$	US \$	Rate	Weight	Axles	Number	Code <sup>(4)</sup>	Group
								1	

**GVW (Gross Vehicle Weight) -** See points (1), (2), (3) and (4) on Weight – Form 3. Weight of the power unit and trailer (if applicable) fully loaded.

- Canada Kilograms (kg).
  - Quebec *Axles* (*steering*, *drive*, *and trailer*).
- United States Pounds (lb).

Please review your application carefully prior to submitting.

• Email: prorate@gov.ab.ca

• Fax: (403) 297-2917

NOTE: For required backup documents see the last page of the Prorate Application Instructions.



# **WEIGHT - FORM 3**

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Client Name	Weight Group No			
A weight group shows the maximum Gross Vehicle (1) A GVW must be provided for <u>all</u> jurisdictions listed (2) Quebec - Enter the total amount of axles for the very (3) See the Prorate Information Guide for a jurisdiction (4) Assign a weight group number (top right) and use	IRP Account Fleet No. Fleet Year MVID (Motor Vehicle ID) ferent weight groups.	AB		
Canada GVW (kg)	United States	GVW (lb)	United States	GVW (lb)
AB Alberta	AL Alabama		NC North Carolina	
BC British Columbia	AR Arkansas		ND North Dakota	
MB Manitoba	AZ Arizona		NE Nebraska	
NB New Brunswick	CA California		NH New Hampshire	
NL Newfoundland	CO Colorado		NJ New Jersey	
NS Nova Scotia	CT Connecticut		NM New Mexico	
ON Ontario	DC Dist. Of Columbia	1	NV Nevada	
PE Prince Edward Is.	DE Delaware		NY New York	
QC Quebec Ax.	FL Florida		OH Ohio	
SK Saskatchewan	GA Georgia		OK Oklahoma	
	IA Iowa		OR Oregon	
Explanation:	ID Idaho		PA Pennsylvania	
Required in the case of a variance of more than 10%	IL Illinois		RI Rhode Island	
in the GVW's between jurisdictions	IN Indiana		SC South Carolina	
	KS Kansas		SD South Dakota	
	KY Kentucky		TN Tennessee	
	LA Louisiana		TX Texas	
	MA Massachusetts		UT Utah	
	MD Maryland		VA Virginia	
	ME Maine		VT Vermont	
	MI Michigan		WA Washington	
	MN Minnesota		WI Wisconsin	
Signature	MO Missouri		WV West Virginia	
-	MS Mississippi		WY Wyoming	
Date	MT Montana			

# **REQUIRED OWNERSHIP DOCUMENTS**

Please see option 1 or 2 for required backup documents.

# 1) PRORATE CARRIER'S VEHICLE

## **Carrier Owns Vehicle Outright**

> Bill of Sale

## **Carrier Co-Owns Vehicle**

- > Bill of Sale
- > Authorization for Vehicle Services Form

## **Carrier Leases Vehicle**

- a) Carrier as the Only Lessee
  - > Lease Agreement
- b) Carrier as a Co-Lessee
  - > Lease Agreement
  - > Plating Letter
  - > Authorization for Vehicle Services Form.

# 2) OWNER/OPERATOR'S VEHICLES

## Owned Vehicle

- > Bill of Sale
- > Authorization for Vehicle Services Form

## **Leased Vehicle**

- > Lease Agreement
- > Plating Letter
- > Authorization for Vehicle Services Form

# How to complete the Authorization for Vehicle Services Form.

Use these instructions and match them up with the Authorization for Vehicle Services Form. Please read both documents carefully. All items listed below should be completed on the Authorization for Vehicle Services Form.

PART 1 - OWNER/LESSEE INFORMATION
I/We, Owner/Operator (Lessee),Drivers license Number or MVID and, Second Owner/Operator (Co-Lessee),Drivers license Number or MVID give consent to, Prorated Carrier,Drivers license Number or MVID
PART 2 - VEHICLE INFORMATION
Vehicle Information - Complete with the details of the vehicle.
PART 3 - SERVICE TYPE REQUEST
Select Service Type - Check one box.
PART 4 – REGISTRATION PARTICULARS
a) Check the box beside - "Register the vehicle in the name(s) as shown below:" b) Enter the Prorated Carrier and the MVID: example 0000-00000
PART 5 - SIGNATURES
Must have signatures of each Owner/Lessee/Registrant from PART 1 (including the Prorated Carrier)  **Needs to be the same number of signatures as there are parties from PART 1 even if someone is signing for more than one party.
Important Information
** Leasing Companies authorize registration in Plating Letters and should never appear on this form.
The Authorization for Vehicles Services Form is required for the vehicles of owner/operators as well as those co-owned by the prorated carrier.
The owner/operator retains ownership, possession and exclusive use of the vehicle. They want to register their vehicle in the name of the prorated carrier in order to use their Safety Fitness Certificate (SFC) and insurance.

\*\*\* Please note: Click on the link below to open the Authorization for Vehicle Services Form.

http://www.servicealberta.gov.ab.ca/pdf/mv/REG0169.pdf

# Plating Letter Instructions - Leased Vehicles

Plating Letters are provided by a Lessor authorizing vehicle registration in the name of a specific company.

# Plating Letters are required when:

- a) An owner/operator is coming onto a carrier's fleet with a leased vehicle.
- b) The lease agreement has multiple parties listed as co-lessees. (If the carrier is the only lessee we do not require the letter.)

These letters must identify the vehicle, name all lessees on the original lease agreement and consent to the prorated carrier as the sole plateholder. The only signature necessary on this letter is one on behalf of the leasing company.

Please find a sample Plating Letter on the next page.

Date:	
LETTER OF AUTHORIZAT	TION/PLATING INSTRUCTIONS
To Whom It May Concern:	
THIS LETTER OF AUTHORIZATION/PLATE INSTRUCTIO OF LICENSING/REGISTRATION OF SAID VEHICLE AND PROVINCE OF ALBERTA.	
MAKE & MODEL:	
YEAR:	
VIN:	
Lessee Names (all names on the lease must appear):	
LESSOR Name:plated under the following	agrees that the above described vehicle will be
Registrant/plate holder name (prorate client ):	
Lessor Signature	
Printed Name & Title	