

# Distance - FORM 1

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.

<b>Client Name</b> _____		<b>Contact Information</b>		IRP Account <b>AB</b> _____
Mailing Address _____	Physical Address _____	Name _____	Fleet No. _____	
_____	_____	Phone _____	Fleet Year _____	
_____	_____	Fax _____	Supp. No. _____	
_____	_____	Email _____	Effective Date _____	
Trade Name, Operating As (O/A), or Doing Business As (DBA) _____			Expiry Date _____	
			MVID (Motor Vehicle ID) _____	

**Type of requested service - Check one**

- New Fleet *Fill in kilometer column **only** if unit(s) have had actual Prorate travel*
- Renewal *Complete this form **only** when you are unable to complete the renewal online*
- Address and/or Name Change

**Operation Type - Check one**

- For Hire
- Private
- Daily Rental

**\*Actual Travel Only\* Complete the following if the vehicles you are adding had actual travel during the last reporting period. (July 1 - June 30)**

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				
AZ Arizona		ME Maine		PA Pennsylvania				
							Total Fleet Distance	

*\*Jurisdictions with an X do not belong to the International Registration Plan. Km's should still be entered if actual travel was accrued.*

**Insurance:** Company Name \_\_\_\_\_  
 Policy No. \_\_\_\_\_  
 Expiry Date (YYYY/MM/DD) \_\_\_\_\_

**Declaration:** The undersigned declares that the information on this form and the attached is true and correct.

Signature \_\_\_\_\_

## ❖ 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 – Motor Vehicle Identification 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.