



General Information for Original Texas Motor Carrier Application

Texas Department of Transportation, Motor Carrier Division, PO BOX 12984, Austin, Texas 78711-2984
(800) 299-1700 (Select 2, then 1 from the automated menu)

Form 1899 (Rev. 2/04)
Page 1 of 5

YOU MUST REGISTER IF YOU ARE A PRIVATE OR FOR-HIRE MOTOR CARRIER OPERATING:

- a vehicle or a combination of vehicles with a gross weight, registered weight, or gross weight rating in excess of 26,000 pounds, which is designed or used for the transportation of cargo in furtherance of any commercial enterprise;
- a tow truck, regardless of the gross weight rating (if you are unsure whether or not the vehicle is a tow truck, contact 1-800-299-1700 and select option 3, then 1 from the automated menu);
- a vehicle designed or used to transport more than 15 passengers (including the driver);
- a vehicle, regardless of gross weight rating, used to transport hazardous materials in a quantity requiring placarding as defined in the Federal Hazardous Materials Transportation Act (49 U.S.C. §5101); or

VEHICLES EXEMPTED FROM THE ABOVE LIST ARE:

- vehicles used **exclusively** in interstate commerce under USDOT/FMCSA/FHWA/ICC Permit or Certificate or Registration and currently registered under the Single State Registration System (SSRS);
- vehicles operated by a foreign motor or motor private carrier defined in 49 USC §13102 and currently registered under the SSRS.
- cotton vehicles registered in accordance with the Texas Transportation Code, §502.277;
- vehicles transporting LP Gas and registered with the Texas Railroad Commission pursuant to the Texas Natural Resources Code, §§113.131 and 116.072;
- vehicles transporting liquor under a private carrier permit issued in accordance with the Texas Alcoholic Beverage Code, Chapter 42;
- motor vehicles used to transport passengers operated by an entity whose primary function is not the transportation of passengers, such as a vehicle operated by a hotel, daycare center, public or private school, nursing home, or similar organization;
- farm vehicles with a gross weight, registered weight, and gross weight rating of less than 48,000 lbs. used to transport your own product, equipment and supplies; or
- vehicles operated by a governmental entities.

To properly file the application you must:

- **complete the application in its entirety (signature is required);**
- **enclose the appropriate fees;**
 1. Application filing fee
 2. Vehicle fees:
 - Registration may be obtained for the duration of 7 days, 90 days, 1 year (annual), or 2 years (biennial).
 - If selecting 2-year registration, the fee is \$20 for each vehicle. For 2-year registration of tow trucks, the fee is \$50 for each tow truck.
 - Household goods carriers may not obtain a 7-day or 90-day certificate of registration.
 3. Insurance filing fee.
 4. Payment of fees may be in the form of a check, cashier's check, or money order payable to the Texas Department of Transportation; or MasterCard, Visa, American Express, Discover, or Escrow Account. A \$1 processing fee will be charged for all credit card transactions. **ALL FEES ARE NON-REFUNDABLE.**
- **file proof of liability insurance on a Form E or E2 (contact your insurance agent);**
- **file proof of cargo insurance on a Form H (Uniform Motor Carrier Cargo Certificate of Insurance) accompanied by a Form I (Uniform Motor Carrier Cargo Insurance Endorsement). This requirement applies only to household goods carriers or tow truck carriers that perform non-consent tows (contact your insurance agent).**

NOTE: The Texas Department of Transportation will notify the applicant of any deficiencies. If the applicant does not comply within 45 days of the notification, the application will be withdrawn and the department will retain all fees. A new application with appropriate fees will be required.

Notice To Interstate Carriers Registering As A Texas Motor Carrier: You can receive credit for fees paid to Texas under the Single State Registration System. Please check with your base state to determine the amount paid for Texas so proper fees can be calculated. A copy of your Single State Receipt must be submitted with the Original Motor Carrier Application to verify the correct amount owed to Texas.

For more information, visit our web site at www.dot.state.tx.us (Select "Trucking & Vehicle Storage Facilities"). For complaints concerning the motor carrier application process, call (512) 465-3696, or write to: TxDOT-MCD, 125 E. 11th Street, Austin, Texas 78701.



Original Texas Motor Carrier Application

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 PO Box 12984, Austin, Texas 78711-2984
 (800) 299-1700 (Select 2, then 1 from the automated menu)

Form 1899 (Rev. 2/04)
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Please type or print legibly in blue or black ink

Check here if oversize/overweight permit is needed

By signing and submitting this application, I certify that the information provided on this form is true and correct, that I am authorized to execute and file this document on behalf of the motor carrier, and that the motor carrier: (1) is in compliance with the drug testing requirements contained in 49 C.F.R. Part 382; (2) has knowledge of, and will conduct operations in accordance with, applicable federal and state laws and rules relating to motor carrier safety, including Texas Transportation Code, Chapters 541-600, 643, and 644; and (3) has the required insurance as set forth in 43 TAC §18.16.

THIS IS A GOVERNMENT RECORD. FALSIFYING INFORMATION ON GOVERNMENT RECORDS IS A FELONY.

Name of Motor Carrier

Street Address (Physical address must be provided)

City, State, Zip

Mailing Address (If different from physical address)

City, State, Zip

Business Phone () -

Fax () -

Applicant is a(n)

Corporation

Partnership

Individual

Social Security Number (Required by State law)

- -

Company Owner, Partners or Corporation Officers (attach additional sheet if necessary)

Name and Title

Name and Title

Name and Title

Name and Title

Does this carrier belong to a drug-testing consortium? Yes No

If "Yes" is checked, please list the names of all persons operating the consortium (attach an additional sheet if necessary).

Persons Operating Consortium:

- 1.
- 2.

Registration

1-year

2-year

NOTE: Household goods carriers may not obtain 7- day or 90-day registration

Duration

7-day

90-day

Type
No. **Type of Motor Carrier Operation**
 (More than one cargo type may be checked)

Insurance Requirements
 (See reverse side for required limits)

- | | | | | | |
|----|---|--|-----|--|--|
| 1. | <input type="checkbox"/> Hazardous Materials (HAZ) | <input type="checkbox"/> \$1 million | OR | <input type="checkbox"/> \$5 million | |
| 2. | <input type="checkbox"/> Tow Truck (TOW) | <input type="checkbox"/> \$300,000 | OR | <input type="checkbox"/> \$500,000 | |
| | Does carrier perform non-consent tows? Yes <input type="checkbox"/> No <input type="checkbox"/> | <input type="checkbox"/> \$50,000 per vehicle cargo insurance (If carrier performs non-consent tows) | | | |
| 3. | <input type="checkbox"/> Passenger (BUS) No. of passengers: _____ | <input type="checkbox"/> \$500,000 | OR | <input type="checkbox"/> \$5 million | |
| 4. | <input type="checkbox"/> Foreign Bus (BUS) No. of passengers: _____ | <input type="checkbox"/> \$1.5 million | OR | <input type="checkbox"/> \$5 million | |
| 5. | <input type="checkbox"/> Household Goods (HHG) | <input type="checkbox"/> \$500,000 | AND | <input type="checkbox"/> \$5,000 cargo insurance (HHG carriers only) | |
| 6. | <input type="checkbox"/> Foreign Carriers (Domiciled outside of U.S.A.) | <input type="checkbox"/> \$750,000 | | | |
| 7. | <input type="checkbox"/> Other than 1 through 6 above (OTHER) | <input type="checkbox"/> \$500,000 | | | |

Legal Agent and Texas Address for Service of Process. For the purpose of administrative or civil service, each out-of-state motor carrier shall have and continuously maintain with the department a legal agent domiciled in Texas. A Texas-domiciled motor carrier that has a legal agent in Texas shall provide the name and address. The legal agent may be a Texas resident, a domestic corporation, or a foreign corporation whose primary function is to serve as an agent of process in Texas with a Texas address (**P.O. Box may not be used**).

Legal Agent's Name

Phone () -

Street Address

City, State, Zip

Applications may be faxed to (512) 465-3521 if paying by credit card or if no fees are due. **Please do not mail this document if faxed.** Allow 3 business days before calling to verify receipt of faxes.

Payment Method (Make payable to Texas Department of Transportation)

- Check, Cashier's Check or Money Order
- Escrow/PAC Account Number: _____
- MasterCard, Visa, Discover, or American Express (A \$1 fee will be charged)

Credit Card Account Number: _____

Expiration Date: _____

To be Completed by Applicant

ALL FEES ARE NON-REFUNDABLE

\$100	Application Filing Fee (1-year or 2-year Registration)	\$
\$25	Application Filing Fee (90-day Registration)	\$
\$5	Application Filing Fee (7-day Registration)	\$
\$100	Liability Insurance Filing Fee	\$
\$100	Cargo Insurance Filing Fee (HHG carriers or tow truck carriers that perform non-consent tows)	\$

Signature of Owner, Partner, Officer or Authorized Agent

Total Vehicle Fees

From page 4, Motor Carrier Equipment Report

\$

Printed/Type Name and Title

Total Amount Remitted

\$

The Texas Department of Transportation maintains the information collected on this form. With a few exceptions, you are entitled upon request to be informed about the information that we collect about you. Under §§552.021, 552.023, and 559.004 of the Texas Government Code, you are entitled to receive and review this information, and to have us correct erroneous information.

For more information, visit our web site at www.dot.state.tx.us (Select "Trucking & Vehicle Storage Facilities"). For complaints concerning the motor carrier application process, call (512) 465-3696, or write to: TxDOT-MCD, 125 E. 11th Street, Austin, Texas 78701.



Insurance Requirements

Texas Department of Transportation, Motor Carrier Division
 PO Box 12984, Austin, Texas 78711-2984
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Before an application is approved, an insurance company authorized to do business in Texas must provide proof of required insurance. Liability insurance coverage is filed on a Form E or E2 and is submitted with the carrier's Texas Motor Carrier Application. Please do not submit a Form E with limits. This will result in the form being returned. Household goods carriers or tow truck carriers that perform non-consent tows are also required to provide proof of cargo insurance on a Form H and I. **Each insurance filing** must be accompanied by a \$100 filing fee made payable to the Texas Department of Transportation. **All insurance filing forms are available through your insurance company.**

Type No. and Type of Motor Carrier	Description	Minimum Insurance Requirement	
1 - HAZ	Transporters of Hazardous Substances (regardless of weight)		
	a. Hazardous substances, as defined in 49 Code of Federal Regulations (CFR) §171.8, transported in cargo tanks, portable tanks, or hopper-type vehicles, with capacities in excess of 3,500 water gallons; or any quantity of Division 1.1, 1.2, and 1.3 materials, any quantity of Division 2.3, Hazard Zone A, or Division 6.1, Packing Group I, Hazard Zone A material; in bulk Division 2.1 or 2.2; or highway route controlled quantities of a Class 7 material, as defined in 49 CFR §173.403.	\$5,000,000	
	b. Oil listed in 49 CFR §172.101: hazardous waste, hazardous materials, and hazardous substances as defined in 49 CFR §171.8 and listed in 49 CFR §172.101, but not mentioned in paragraphs (a) or (b) of this subsection and petroleum products that are lubricants or fuels	\$1,000,000	
2 - TOW	Tow Truck Carriers		
	a. Gross weight, registered weight, or gross weight rating of 26,000 pounds or less	\$300,000	
	b. Gross weight, registered weight, or gross weight rating over 26,000 pounds	\$500,000	
	c. In addition to automobile liability insurance described above, tow truck carriers that perform non-consent tows must file a Form H (Uniform Motor Carrier Cargo Certificate of Insurance) accompanied by a Form I (Uniform Motor Carrier Cargo Insurance Endorsement) with the following limits	\$50,000 per vehicle	
3 - BUS	Bus Operators		
	a. Vehicles designed or used to transport more than 15 passengers (including the driver) but less than 26 passengers (not including the driver)	\$500,000	
	b. Vehicles designed or used to transport 26 passengers or more (not including the driver)	\$5,000,000	
4 - BUS	Foreign Domiciled Bus Operators		
	a. Vehicles designed or used to transport 15 passengers or less (including the driver)	\$1,500,000	
	b. Vehicles designed or used to transport 16 passengers or more (including the driver)	\$5,000,000	
5 - HHG	Household Goods Movers		
	In addition to automobile liability insurance as described in number 7 below, cargo insurance must be filed on Form H (Uniform Motor Carrier Cargo Certificate of Insurance) accompanied by a Form I (Uniform Motor Carrier Cargo Insurance Endorsement) with the following limits	Per Shipment	\$5,000
		Aggregate	\$10,000
6	Foreign Carriers		
	(Domiciled outside of the U.S.A.) transporting cargo other than cargo listed above	\$750,000	
7 - OTHER	All Others		
	Private or for-hire motor carriers with a gross weight, registered weight, or gross weight rating in excess of 26,000 pounds	\$500,000	

Note: Motor carriers whose primary business is transportation for compensation or hire, and who operate between two or more incorporated cities, towns, or villages, shall provide worker's compensation or accident insurance coverage for all employees. **(Not filed with TxDOT.)**

For more information, visit our web site at www.dot.state.tx.us (Select "Trucking & Vehicle Storage Facilities"). For complaints concerning the motor carrier application process, call (512) 465-3696, or write to: TxDOT-MCD, 125 E. 11th Street, Austin, Texas 78701.



Motor Carrier Equipment Report

Texas Department of Transportation, Motor Carrier Division
PO BOX 12984, Austin, Texas 78711-2984
(800) 299-1700 (Select 2, then 1 from the automated menu)

**CERTIFICATE
NUMBER**

By signing and submitting this application, I certify that the information provided on this form is true and correct, that I am authorized to execute and file this document on behalf of the motor carrier, and that the motor carrier: (1) is in compliance with the drug testing requirements contained in 49 C.F.R. Part 382; (2) has knowledge of, and will conduct operations in accordance with, applicable federal and state laws and rules relating to motor carrier safety, including Texas Transportation Code, Chapters 541-600, 643, and 644; and (3) has the required insurance as set forth in 43 TAC §18.16.
FALSIFYING INFORMATION ON GOVERNMENT RECORDS IS A FELONY.

INSTRUCTIONS	<ul style="list-style-type: none"> Type or print legibly in blue or black ink. Provide all required information on all vehicles. This form will be returned if not signed. 	<ul style="list-style-type: none"> List each vehicle you will operate. Do not list trailers. If additional space is needed, please make a copy of this page.
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Name of Motor Carrier	Business Phone ()
Street Address (Physical Address Must be Provided)	City, State, Zip
Mailing Address (If Different from Physical Address)	City, State, Zip

Type of Motor Carrier "TOW"= Tow Truck "HAZ"= Hazardous "HHG"= Household Goods "BUS"= Bus "OTHER"= Other Cargo Not Listed

Make of Truck	Unit Number	Year of Vehicle	COMPLETE Vehicle Identification Number (VIN)	Type of Motor Carrier Operation				
				TOW	HAZ	HHG	BUS	OTHER
1.								
2.								
3.								
4.								
5.								
6.								
7.								
8.								
9.								
10.								

Applications may be faxed to (512) 465-3521 if paying by credit card or if no fees are due. Please **do not mail original application if faxed**. Allow 3 business days before calling to verify receipt of faxes.

<p>Payment Method (Make payable to the Texas Department of Transportation)</p> <p><input type="checkbox"/> Check, Cashier's Check or Money Order</p> <p><input type="checkbox"/> Escrow/PAC Account Number: _____</p> <p><input type="checkbox"/> MasterCard, Visa, Discover, or American Express (A \$1 fee will be charged for all credit card transactions.)</p> <p>Credit Card Account Number: _____ Expiration Date: _____</p>	<p>To be Completed by Applicant (FEES ARE NON-REFUNDABLE)</p> <p>Registration Duration (Check One): <input type="checkbox"/> 1-year <input type="checkbox"/> 2-year</p> <p>For 1-year Registration:</p> <p>_____ Number of Tow Trucks X \$25 = \$ _____</p> <p>_____ Number of Other Vehicles X \$10 = \$ _____</p> <p>For 2-year Registration:</p> <p>_____ Number of Tow Trucks X \$50 = \$ _____</p> <p>_____ Number of Other Vehicles X \$20 = \$ _____</p> <p>TOTAL VEHICLE FEES \$ _____</p>
<p>Signature of Owner, Partner, Officer or Authorized Agent</p> <p>X _____</p>	<p>Print or Type Name and Title:</p> <p>_____</p>

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Make of Truck	Unit Number	Year of Vehicle	COMPLETE Vehicle Identification Number (VIN)	Type of Motor Carrier Operation				
				TOW	HAZ	HHG	BUS	OTHER
1.								
2.								
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Check List for Original Texas Motor Carrier Application and Equipment Report

Texas Department of Transportation, Motor Carrier Division
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HAVE YOU:

- Provided the same name on the application and equipment report?
- Provided your Social Security Number if you are filing as an individual?
- Provided names of corporate officers or partners if you are filing as a corporation or partnership?
- Selected registration duration?
 - 7-day or 90-day registration with effective and expiration dates or
 - 1-year registration or
 - 2-year registration
- Marked the boxes indicating the type of motor carrier operation and the amount of insurance coverage required?
 - **"HAZ"** - Hazardous Materials
 - **"TOW"** - Tow Truck (check box to indicate if carrier performs non-consent tows)
 - **"BUS"** - Bus
 - **"HHG"** - Household Goods
 - **"OTHER"** - Other Cargo Not Listed
- Provided a legal agent, if applicable?
- Enclosed a check, cashier's check, or money order payable to the Texas Department of Transportation, or provided your credit card information for the following fees?
 - Application fees
 - \$100 or
 - \$25 (90-day registration) or
 - \$5 (7-day registration)
 - \$100 fee per insurance filing
 - Vehicle fees
 - \$10 per vehicle for 7-day, 90-day, or 1-year registration of vehicles other than tow trucks or
 - \$20 per vehicle for 2-year registration of vehicles other than tow trucks or
 - \$25 per tow truck for 7-day, 90-day, or 1-year registration or
 - \$50 per tow truck for 2-year registration.
- Requested from your insurance company proof of automobile liability insurance to be filed on a Form E or E-2?
 - Insurance filings must show effective and expiration dates for 7-day and 90-day registration.
 - Insurance filings must be in the same name as shown on your application.
- Requested from your insurance company proof of cargo insurance to be filed on a Form H accompanied by a Form I (household goods carriers or tow truck carriers that perform non-consent tows)?
- Completed the fee and payment information on both the Original Texas Motor Carrier Application and Motor Carrier Equipment Report?
- Included the make of each truck, unit number, year of vehicle, COMPLETE vehicle identification number (VIN) and the type of motor carrier operation on the equipment report?
- Signed the application and equipment report?

Your Application Will Be Delayed If ALL Information Is Not Submitted

**Your Application Will Be RETURNED For Failure To Provide
Fees Or Proof Of Insurance**