

FLEET REGISTRATION SUPPLEMENTAL APPLICATION

(The space above is for Department use only) Commercial Registration Section • P. O. Box 68289 Harrisburg, PA 17106-8286

| | | <u> </u> | | | | | | | | | | |
|---|---|-------------------|---------------------------------|-------------|----------------|--------------------------------------|---------------------|------------|---------------------|---|--------------------------|--|
| Α | APPLICANT INFORMATION | | | | | | | | | | | |
| | Name of Applicant | | | | | Business Address | | | | | | |
| | City | County | | | | | State | Zip Code | | | | |
| В | FLEET INFORMATION | | | | | | | | | | | |
| | New Vehicle Only License Transfer with Weight Increase License transfer Delete Only Transfer from Fleet | | | | | | | | | | | |
| | Account Number | count Number | | | PUC Number | mber Owner Fleet Expiry Date Lessee | | | Card | No. of Duplicate Registration Cards for Each Vehicle in the Fleet | | |
| С | /EHICLE ADDITIONS | | | | | | | | | | | |
| | Owner's Equipment Number | Vehicle Serial or | | | | Lessor / Lessee | Comb | ined Axles | Gross Weight | | Combined Gross Weight | |
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| D | EHICLE CHANGES | | | | | | | | | | | |
| | ☐ TRANSFER ☐ DELET | | | | | ☐ TEMP TAGS | | | | | | |
| | Owner's Equipment Number | Title Number | Replacement Equipment Number | Registratio | n Plate Number | Date of Temp Tag or | Tag or Transfer Iss | | ssuing Agent Number | | Expiration Date of Tag | |
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| E | INSURANCE INFORM | IATION | | | | | | | | | | |
| | Insurance Company Name | | | | | Policy Number Policy Effective D | | | | e Policy Expiration Date | | |
| F | ACKNOWLEGEMENT | | | | | | | | | | | |
| | I/We acknowledge that I/we may lose my/our operating privilege or vehicle registration for failure to maintain financial responsibility on the currently registered vehicle for the period of registration. | | | | | | | | | | | |
| | Signature of Applicant(s) | | | | | Title | | | | | ate | |