

Massachusetts IRP Application

Date: _____

New Application Change to Current Account (Supplement) Renewal Application

A

1. Account No.	2. Fleet No.	3. Supplement No. FOR RMV USE ONLY
4. Name on Account *(Responsible for payment)		

B

SIGNATURE		
<p>I/We the applicant(s) hereby certify under the penalties of perjury that there are no outstanding excise tax liabilities on the vehicle described above that have been incurred by the applicant(s). Any member of the applicant's immediate family who is a member of the applicant's household or the business partner of the applicant(s). The undersigned hereby further certify that all information contained in this application is true and correct to the best of their knowledge and belief. False statements are punishable by fine, imprisonment or both.</p>		
Signature of Owner	Signature of Joint Owner	Date
<p>Signature on this Application by the applicant or authorized representative constitutes the applicant's consent to have the information submitted as part of participation in IRP and verified through an audit performed by the Commonwealth of Massachusetts Registry of Motor Vehicles, the Department of Revenue, or their agents. Further, the applicant understands that the Registry of Motor Vehicles and the Department of Revenue may exchange the information obtained during an audit for purposes of enforcing the International Registration Plan (IRP) and the International Fuel Tax Agreement (IFTA).</p>		

Important Information

Please Refer To The Massachusetts IRP Manual For Instructions Necessary To Complete This Application

- All vehicles being renewed with a combined or gross weight of 55,000 pounds or more must be accompanied by proof of payment or exemption of the Federal Heavy Vehicle Use Tax (IRS Form No. 2290). Refer to the MA IRP Manual for instructions and explanations.
- Applications should be typed or printed, in ink, clearly. Incomplete or illegible applications will be returned to the registrant without processing.
- Submission of your application does not constitute authorization for you to travel on any public roads or highways in any IRP jurisdiction without a properly displayed IRP license plate and cab card.
- A Power of Attorney will be required, each year, for each vehicle contained in this application that is not titled in the name of the registrant.
- Applications that are received without being signed will be returned without processing.

C

1. ACCOUNT NO.	2. FLEET NO.	3. SUPP NO.	6. NAME ON ACCOUNT	
4. FEDERAL ID NO. / LICENSE NO			7. BUSINESS LOCATION (DO NOT USE PO BOX)	
5. TYPE OF APPLICATION (CHECK ONE CATEGORY ONLY)			8. CITY STATE MA ZIP CODE	
<input type="checkbox"/> ADD VEHICLE	<input type="checkbox"/> LOST/STOLEN	<input type="checkbox"/> PLATE TRANSFER	9. MAILING ADDRESS (MAY USE PO BOX)	
<input type="checkbox"/> DELETE VEHICLE	<input type="checkbox"/> NEWPLATE	<input type="checkbox"/> ADD STATE	10. CITY STATE ZIP CODE	
<input type="checkbox"/> INCREASE/DECREASE WEIGHT	<input type="checkbox"/> CABCARD	<input type="checkbox"/> CORRECT INFORMATION	11. PERSON TO CONTACT REGARDING APPLICATION	
PLEASE SUBMIT A BLANK CHECK WITH YOUR APPLICATION. YOU WILL BE INVOICED FOR REGISTRATION FEES DUE			12. CONTACT PHONE NUMBER ()	
REGULATORY INFORMATION			ABBREVIATIONS	
13. DOT NO.			TRANSACTION TYPE O = ORIGINAL T = TRANSFER R = RENEWAL I = INCREASE WGT C = CORRECTION D = DECREASE WGT	VEHICLE TYPE TR = TRACTOR TK = SINGLE TRUCK TT = TRUCK TRACTOR RT = ROAD TRACTOR WR = WRECKER
14. MOTOR FUEL NO.				
15. CANADIAN PROVINCIAL OPERATING AUTHORITY NO.				
TYPE OF OPERATION			FUEL TYPE D = DIESEL G = GASOLINE P = PROPANE O = OTHER	
16. PLEASE CHECK OPERATION TYPE: <input type="checkbox"/> PRIVATE CARRIER <input type="checkbox"/> HAUL FOR HIRE <input type="checkbox"/> RENTAL COMPANY <input type="checkbox"/> HOUSEHOLD GOODS MOVER				

D

WEIGHT INFORMATION Units listed on this application will be authorized to operate in the jurisdictions and at the weights listed below. The weight recorded below will appear in the cab card for all IRP jurisdictions for the Units listed below.

AL Alabama	KY Kentucky	NV Nevada	WV West Virginia
AK Alaska	LA Louisiana	NY New York	WY Wyoming
AR Arkansas	MA Massachusetts	OH Ohio	AB Alberta
AZ Arizona	MD Maryland	OK Oklahoma	BC British Columbia
CA California	ME Maine	OR Oregon	MB Manitoba
CO Colorado	MI Michigan	PA Pennsylvania	MX Mexico
CT Connecticut	MN Minnesota	RI Rhode Island	NB New Brunswick
DC Dist. of Col.	MO Missouri	SC South Carolina	NL Newfoundland
DE Delaware	MS Mississippi	SD South Dakota	NS Nova Scotia
FL Florida	MT Montana	TN Tennessee	NT Northwest Territory
GA Georgia	NC North Carolina	TX Texas	ON Ontario
IA Iowa	ND North Dakota	UT Utah	PE Prince Edward Island
ID Idaho	NE Nebraska	VA Virginia	QC Quebec
IL Illinois	NH New Hampshire	VT Vermont	SK Saskatchewan
IN Indiana	NJ New Jersey	WA Washington	YT Yukon
KS Kansas	NM New Mexico	WI Wisconsin	

G

Mileage Schedule

List mileage in each state in which this fleet traveled for the period July 1 through June 30 of the year before the registration year for which you are applying. Place an X in the square in front of the name of the state if you desire an apportionment in that state. For estimated mileage see the addendum at the back of this form. Do not show actual and estimated miles for the same state.

(X)	STATE	EST MILES	ACTUAL MILES	(X)	STATE	EST MILES	ACTUAL MILES	(X)	STATE	EST MILES	ACTUAL MILES
	AL Alabama				MI Michigan				TX Texas		
	AK Alaska				MN Minnesota				UT Utah		
	AR Arkansas				MO Missouri				VA Virginia		
	AZ Arizona				MS Mississippi				VT Vermont		
	CA California				MT Montana*				WA Washington		
	CO Colorado				NC North Carolina				WI Wisconsin		
	CT Connecticut				ND North Dakota				WV West Virginia		
	DC Dist. of Col.				NE Nebraska				WY Wyoming**		
	DE Delaware				NH New Hampshire				AB Alberta		
	FL Florida				NJ New Jersey				BC British Columbia		
	GA Georgia				NM New Mexico				MB Manitoba		
	IA Iowa				NV Nevada				MX Mexico		
	ID Idaho				NY New York				NB New Brunswick		
	IL Illinois				OH Ohio				NL Newfoundland		
	IN Indiana				OK Oklahoma				NS Nova Scotia		
	KS Kansas				OR Oregon				NT Northwest Territory		
	KY Kentucky				PA Pennsylvania				ON Ontario		
	LA Louisiana				RI Rhode Island				PE Prince Edward Is.		
X	MA Massachusetts				SC South Carolina				QC Quebec ***		
	MD Maryland				SD South Dakota				SK Saskatchewan		
	ME Maine				TN Tennessee				YT Yukon		

*MT Montana check box that applies:

SPLIT COMBINED GROSS WEIGHT

**WY Wyoming check box if you

Have Intrastate Authority

Total Mileage _____

Mileage information and signature on this Application by the applicant or authorized representative constitutes the applicant's consent to have the information submitted as part of participation in IRP and verified through an audit performed by the Commonwealth of Massachusetts Registry of Motor Vehicles, the Department of Revenue, or their agents. Further, the applicant understands that the Registry of Motor Vehicles and the Department of Revenue may exchange the information obtained during an audit for purposes of enforcing the International Registration Plan (IRP) and the International Fuel Tax Agreement (**IFTA**).

I have submitted estimated distances in accordance with the Massachusetts International Registration Plan Estimated Mileage Chart, as provided under section 801 of the International Registration Plan.

Explain the scope of your operation including any estimated miles.
(Explain the products that you are hauling and the source of estimated mileage.)

2009 Estimated Mileage Chart

JURISDICTION	AVG. MI. PER VEHICLE	JURISDICTION	AVG. MI. PER VEHICLE
Alberta (AB)	241	North Dakota (ND)	22
Alabama (AL)	107	Nebraska (NE)	94
Arkansas (AR)	129	New Hampshire (NH)	1992
Arizona (AZ)	169	New Jersey (NJ)	2297
British Columbia (BC)	187	Newfoundland & Labrador (NL)	1
California (CA)	246	New Mexico (NM)	133
Colorado (CO)	93	Nova Scotia (NS)	1422
Connecticut (CT)	4956	Nevada (NV)	69
District of Columbia (DC)	25	New York (NY)	3311
Delaware (DE)	199	Ohio (OH)	803
Florida (FL)	514	Oklahoma (OK)	136
Georgia (GA)	293	Ontario (ON)	62
Iowa (IA)	95	Oregon (OR)	39
Idaho (ID)	53	Pennsylvania (PA)	1326
Illinois (IL)	313	Prince Edward Island (PE)	285
Indiana (IN)	376	Quebec (QC)	142
Kansas (KS)	69	Rhode Island (RI)	1717
Kentucky (KY)	126	South Carolina (SC)	322
Louisiana (LA)	95	South Dakota (SD)	23
Massachusetts (MA)	21644	Saskatchewan (SK)	363
Manitoba (MB)	715	Tennessee (TN)	314
Maryland (MD)	699	Texas (TX)	414
Maine (ME)	1445	Utah (UT)	61
Michigan (MI)	181	Virginia (VA)	711
Minnesota (MN)	59	Vermont (VT)	853
Missouri (MO)	135	Washington (WA)	38
Mississippi (MS)	74	Wisconsin (WI)	111
Montana (MT)	44	West Virginia (WV)	90
New Brunswick (NB)	59	Wyoming (WY)	85
North Carolina (NC)	437		

IF YOU ARE A NEW ACCOUNT, OR IF YOU WILL BE ADDING A JURISDICTION FOR THE FIRST TIME AND DO NOT HAVE ANY ACTUAL MILEAGE TO REPORT, YOU MUST ESTIMATE YOUR MILEAGE.

THE ESTIMATED MILEAGE GUIDE MAY BE USED IF YOU HAVE NO OTHER SOURCE FOR OBTAINING MILEAGE. YOU MAY JUSTIFY YOUR OWN MILEAGE FIGURES, IF YOU SO DESIRE, IN THE SCOPE OF OPERATION SECTION OF YOUR IRP APPLICATION.

THIS CHART IS SUBJECT TO CHANGE