



DEPARTMENT OF TRANSPORTATION
DRIVER AND MOTOR VEHICLE SERVICES
1905 LANA AVE NE, SALEM OREGON 97314

Instructions for Completing a Transporter Application for a 3-Year Vehicle Transporter Certificate

(Originals and Renewals)

Complete the application. You must include an email address on Line 5.

Legal Name - If your business is a sole proprietorship, list your full name as the legal name. If your business is a partnership, list the full names of each partner or the partnership name. If your business is an LLC, list the name of the limited liability company (includes "LLC") registered with Oregon's Secretary of State Corporations Section (Business Registry). If your business is a corporation, list the name of the corporation (includes Inc, Corp, etc.) registered with Business Registry. All partnerships, LLCs, and corporations must be registered with Oregon's Secretary of State.

Business Name - If using an assumed business name or trade name, list the business name registered with Business Registry.

Oregon Registry Numbers - If you do not know your Oregon registry number(s), contact Business Registry at 503-986-2200 or sos.oregon.gov/business/pages/default.aspx

Federal Employer Identification Number (FEIN) - You must provide your FEIN. To apply for an FEIN, visit www.irs.gov. It is free from the IRS.

Business Location - List the main business location of the transporter business.

If main location is outside Oregon -

- List any Oregon location(s) on Lines 6 and 7.
- Attach a copy of your certificate, license, permit or similar document from the jurisdiction of your main location (state listed on Line 3).

Type of Organization - Check your organization type and if a corporation, list the state under whose law the business is incorporated.

Use of Transporter Plates - Transporter plates have limited uses. Be specific on how you will use the transporter plate(s) in your response on page 2. See "Use of Transporter Plates" on page 3 for additional information. The application will be returned if the statement of use is missing.

Registered Agent - If your business is an LLC or a corporation, provide the registered agent's name, street address and mailing address on lines 10-12.

Ownership/Applicant's Certification Signature - Provide name, residence address, mailing address and signature of owner, partners, LLC members or corporate officers on page 4.

Plate Billing List and Calculation sheet (Renewals only) - Follow the instructions on the calculation sheet for fees and submit the calculation sheet and plate list with your renewal.

Read all parts of the application before completing it. Your application will be returned to you if any part is incomplete or missing. Submit your completed application and fees to:

DMV Business Licensing
1905 Lana Ave NE
SALEM OR 97314
Phone: 503-945-5052

Lost/Missing/Stolen Transporter Plate(s): To report a lost or missing plate, send the lost or stolen plate's number to DMV Business Licensing at 1905 Lana Ave NE, Salem OR 97314, or fax 503-945-5289, or email DMVinsert@odot.oregon.gov

Purchasing Additional Plate(s): To purchase an additional plate(s), submit your request on form 735-6938 <https://www.oregon.gov/odot/Forms/DMV/6938fill.pdf> and \$18.00 per plate to DMV Business Licensing by mailing to the address above. A maximum of 10 plates is allowed at any given time.



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APPLICATION FOR 3-YEAR VEHICLE TRANSPORTER CERTIFICATE



CUSTOMER NUMBER	EFFECTIVE DATE	EXPIRATION DATE	TRANSPORTER NUMBER	<input type="checkbox"/> ORIGINAL <input type="checkbox"/> RENEWAL
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If this is a renewal, do not complete the fee information. Use the attached billing list to calculate your fees. The billing list MUST be submitted with your renewal application.

3-year Certificate Fee \$ **450.00**

Plates _____ @ \$18.00 each..... \$ _____

Transporters are limited to a maximum of 10 plates. **TOTAL \$**

- For instructions to complete an application, see Page 1.
- If you need information on Oregon registry numbers, call (503) 986-2200.

OFFICE USE

CERTIFICATE FEE

RENEWAL PLATES

ADDITIONAL PLATES

TOTAL \$

TEMPORARY PLATES

LEGAL AND BUSINESS NAME AND ADDRESS

1 LEGAL NAME OF APPLICANT (OWNER, PARTNERSHIP, LLC OR CORPORATION NAME)	FEDERAL EMPLOYER ID NUMBER	OREGON REGISTRY NUMBER (IF LLC OR CORPORATION)		
2 BUSINESS NAME OF APPLICANT (IF ASSUMED BUSINESS NAME, OR TRADE NAME)	OREGON REGISTRY NUMBER (IF USING ASSUMED BUSINESS NAME OR TRADE NAME)	BUSINESS TELEPHONE		
3 MAIN BUSINESS LOCATION (STREET AND NUMBER)	CITY	STATE	ZIP CODE	COUNTY
4 MAILING ADDRESS	CITY	STATE	ZIP CODE	COUNTY
5 EMAIL ADDRESS (REQUIRED)				

IF MAIN LOCATION OUTSIDE OF OREGON (List any business locations in Oregon)

6 BUSINESS ADDRESS (STREET AND NUMBER)	CITY	ZIP CODE	COUNTY	TELEPHONE
7 BUSINESS ADDRESS (STREET AND NUMBER)	CITY	ZIP CODE	COUNTY	TELEPHONE

8 Attach copy of permit, certificate, license or similar documents from the jurisdiction of your main location (State listed on Line 3 above).

TYPE OF ORGANIZATION

9 CHECK ORGANIZATION TYPE: Individual Partnership LLC Corporation

If corporation, list the state under whose law business is incorporated: _____

TRANSPORTER PLATES

1) Transporter plates will be issued to transport vehicles (ORS 822.310):

From Oregon manufacturers or Oregon certified vehicle dealers, to the vehicle purchaser or dealer in Oregon; **or**

2) Transporter plates will be used to transport manufactured structures (ORS 822.310) from the place of manufacture in Oregon:

To an Oregon manufactured structure dealer's place of business

Write a statement on how the transporter plate(s) requested will be used in conjunction with the checking of box(es) (1) and/or (2) above. Your application will be deemed incomplete without this information.

I AM USING THE TRANSPORTER PLATES TO:

Provide copies of ALL owners, partners, LLC members or corporate officers' valid government photo ID's (driver license or state issued identification cards ONLY) to your application. If the residence address on the photo ID is different than the residence address listed, write a statement explaining why the addresses do not match.

The reason the photo ID differs from the residence address:

USE OF TRANSPORTER PLATES

- Transporter plates can only be used to transport vehicles that are for sale. Please explain how you will use the transporter plates.
- A transporter plate must be displayed on the rear of the vehicle being driven or towed.
- Transporter plates cannot be used on a power unit that is towing a vehicle. Towing is an activity subject to a towing business license.
- Transporter plates are not to be used on any commercial vehicles or any vehicles carrying a load.
- Any other movement of a manufactured structure must be by a manufactured structure trip permit.
- Transporter plates can only be used within the State of Oregon.

Complete the section(s) below and sign.
 (Be sure to attach a separate sheet to show additional owners.)

- List the primary owner, partners, LLC members or corporate officers below.
- If a member of a limited liability company (LLC) is a corporation, the president must provide information below.
- If a partner of a partnership is a corporation, the president must provide information below.
- If corporation or LLC, the Oregon registered agent name and address must be provided on lines 10-12.

10	OREGON REGISTERED AGENT NAME		TELEPHONE NUMBER	
11	OREGON REGISTERED AGENT MAILING ADDRESS	CITY	STATE	ZIP CODE
12	OREGON REGISTERED AGENT STREET ADDRESS	CITY	STATE	ZIP CODE

OWNERSHIP INFORMATION

13	PRINT NAME OF OWNER, PARTNER, LLC MEMBER, OR CORPORATE OFFICER		TITLE		RESIDENCE TELEPHONE NUMBER	
14	DATE OF BIRTH	DRIVER LICENSE NUMBER	STATE OF ISSUANCE			
15	RESIDENCE ADDRESS		CITY	STATE	ZIP CODE	
16	EMAIL ADDRESS	MAILING ADDRESS (IF DIFFERENT)	CITY	STATE	ZIP CODE	
17	CERTIFYING SIGNATURE OF OWNER SHOWN ON LINE 13 ABOVE X				DATE	
18	PRINT NAME OF OWNER, PARTNER, LLC MEMBER, OR CORPORATE OFFICER		TITLE		RESIDENCE TELEPHONE NUMBER	
19	DATE OF BIRTH	DRIVER LICENSE NUMBER	STATE OF ISSUANCE			
20	RESIDENCE ADDRESS		CITY	STATE	ZIP CODE	
21	EMAIL ADDRESS	MAILING ADDRESS (IF DIFFERENT)	CITY	STATE	ZIP CODE	
22	CERTIFYING SIGNATURE OF OWNER SHOWN ON LINE 18 ABOVE X				DATE	
23	PRINT NAME OF OWNER, PARTNER, LLC MEMBER, OR CORPORATE OFFICER		TITLE		RESIDENCE TELEPHONE NUMBER	
24	DATE OF BIRTH	DRIVER LICENSE NUMBER	STATE OF ISSUANCE			
25	RESIDENCE ADDRESS		CITY	STATE	ZIP CODE	
26	EMAIL ADDRESS	MAILING ADDRESS (IF DIFFERENT)	CITY	STATE	ZIP CODE	
27	CERTIFYING SIGNATURE OF OWNER SHOWN ON LINE 23 ABOVE X				DATE	

28 I certify I am an owner, partner(s), member(s) of LLC or corporate officer(s) of this business and all information on this application is true and correct. I understand it is a crime under ORS 162.085 to certify the truth of a statement when you know it is not true. Such a crime is a Class B misdemeanor and is punishable by a jail sentence of up to 6 months, a fine of up to \$2,500, or both.

28	SIGNATURE X	TITLE
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