



4. Have you ever been denied registration?  
 Yes – Explain \_\_\_\_\_  
 No
5. Have you ever had your registration suspended or revoked?  
 Yes – Explain \_\_\_\_\_  
 No
6. Are your vehicle(s) presently leased to any individual or company?  
 Yes – Name, address & phone number of lessee: \_\_\_\_\_  
\_\_\_\_\_  
 No
7. Driver of the vehicle: \_\_\_\_\_  
Driver's license #: \_\_\_\_\_  
State: \_\_\_\_\_  
CDL:  Yes  No
8. Operating Authority Number (if any) you will be working under: \_\_\_\_\_  
Jurisdiction of issuance: \_\_\_\_\_ Is this your authority?  Yes  No  
If no, please provide name and address of authority holder: \_\_\_\_\_  
\_\_\_\_\_
9. Are there any actual miles that have been accrued by your vehicle(s) that will be required to be reported?  
 Yes  No  
If yes, explain origin of miles: \_\_\_\_\_  
\_\_\_\_\_
10. Have you ever been audited by Nevada or any other IRP jurisdiction?  
 Yes  No  
If yes, approximately when: \_\_\_\_\_
11. Have you been instructed on the importance of maintaining individual vehicle distance records?  
 Yes  No
12. At what address do you plan to maintain these records for audit purposes?  
\_\_\_\_\_  
\_\_\_\_\_
13. Has any licensing service, remittance agency, trucking service agency, consultant, or any other individual(s) assisted you in the preparation of your IRP application(s)?  
 Yes  No  
If yes, please list name and address: \_\_\_\_\_  
\_\_\_\_\_

14. You must complete the following and give a detailed business plan as justification for selection of jurisdictions in which you wish to apportion (*A detailed answer is required. Registration may be denied if not adequately answered. Attach additional sheets, if needed*):

STATE \_\_\_\_\_ Mileage X No. of Trips X Vehicles = Total Est. Mileage  
\_\_\_\_\_

**Explanation of estimate:**  
\_\_\_\_\_

STATE \_\_\_\_\_ Mileage X No. of Trips X Vehicles = Total Est. Mileage  
\_\_\_\_\_

**Explanation of estimate:**  
\_\_\_\_\_

STATE \_\_\_\_\_ Mileage X No. of Trips X Vehicles = Total Est. Mileage  
\_\_\_\_\_

**Explanation of estimate:**  
\_\_\_\_\_

STATE \_\_\_\_\_ Mileage X No. of Trips X Vehicles = Total Est. Mileage  
\_\_\_\_\_

**Explanation of estimate:**  
\_\_\_\_\_

STATE \_\_\_\_\_ Mileage X No. of Trips X Vehicles = Total Est. Mileage  
\_\_\_\_\_

**Explanation of estimate:**  
\_\_\_\_\_

## VERIFICATION

*I, (we), the undersigned hereby certify that under penalty of perjury, that I (we) am the applicant making the foregoing Schedule G application, and that the Schedule G application has been read and the contents thereof and all statements contained herein are true, correct and complete to the best of my knowledge and belief.*

Signed \_\_\_\_\_

Subscribed and sworn before me this \_\_\_\_\_ day

of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Public or Authorized Nevada DMV Representative

Application Accepted By: _____	
Reviewed By: _____	
Approved	_____
	Yes                      No
Reason for Denial _____	
_____	
_____	