



## APPLICATION FOR LICENSING AGENTS

### Section A: Licensing Information

Company Name (Legal Business Name)	DBA		
Secretary of State- Business License Number	Federal Employer Identification Number (FEIN)		
Principal's Full Legal Name and Title	Principles Driver License Number		
Principal's Address	City	State	Zip Code

### Section B: General Information

Physical Address	City	State	Zip Code
Mailing Address	City	State	Zip Code
Contact/Principal's Name and Title	Phone Number		
E-Mail Address	Fax Number		

### Section C: Agent Information

Agent	Email	Document Preparation Number
Agent	Email	Document Preparation Number
Agent	Email	Document Preparation Number
Agent	Email	Document Preparation Number
Agent	Email	Document Preparation Number

### Please attach copies of the following documents:

- ☐ Proof of FEIN (SS4 Letter)
- ☐ State Business License
- ☐ Document Preparation Service Certificate(s) (for each employee listed- can attach additional pages for more employees)
- ☐ Copy of the Principal's Driver's License
- ☐ Power of Attorney for each company

Under penalties of perjury, the applicant declares that the information given is to the best of the applicant's knowledge true, accurate and complete. The applicant agrees to comply with reporting, payment, record keeping and license display requirements as specified in the International Fuel Tax Agreement, the International Registration Plan, and the Nevada Revised Statutes as applicable. The applicant further agrees that the Motor Carrier Division may withhold any refunds due if the applicant is delinquent on payment of any fees due to the Department or fuel taxes due to any member jurisdictions. Failure to comply with these provisions shall be grounds for revocation of license in Nevada and all member jurisdictions. The applicant agrees to maintain insurance pursuant to **NRS 485.185** and **706.291** and will comply with the Motor Carrier Safety Regulations.

PLEASE NOTE: THIS APPLICATION MUST BE SIGNED OR IT WILL BE RETURNED TO YOU

Printed Full Legal Name (and title if applicable)	Signature	Date
Phone Number	Email Address	