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USDOT NO. \_\_\_\_\_  
PIN \_\_\_\_\_  
SUB NO. \_\_\_\_\_

**TDF 1** (06-08)  
**APPLICATION FOR INTRASTATE MOTOR CARRIER LICENSE**  
OAC 165:30-3-1; OAC 165:30-15-4

1. **USDOT Number** \_\_\_\_\_ **FEIN/SSN** \_\_\_\_\_  
Applicant \_\_\_\_\_  
Doing business as (trade name if any) \_\_\_\_\_

2. **Addresses and Contact Information**

<b>Mailing Address 1</b> c/o _____ P.O. or Street _____ City, State, Zip _____ Telephone No. (_____) _____ Fax No. (_____) _____ Email _____	<b>Mailing Address 2</b> c/o _____ P.O. or Street _____ City, State, Zip _____ Telephone No. _____ Fax No. _____ Email _____
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<b>Carrier's Physical Address or Location</b> Street _____ City, State, Zip _____	<b>Carrier's Contact Person</b> _____ <b>Telephone #</b> (_____) _____ <b>Domicile County</b> _____
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3. Principle Place of Business State (PPB) \_\_\_\_\_  
If Principle Place of Business State is Oklahoma, is Applicant properly registered with the Oklahoma Secretary of State?  Yes  No  
If PPB State is not Oklahoma, provide Oklahoma Process Agent name and address: \_\_\_\_\_

4. Type of Applicant: (MARK ONE - Complete Attachment "A" Part 1 for all categories *except* Sole Proprietorship)  
 **SOLE PROPRIETORSHIP**     **CORPORATION**     **PARTNERSHIP**     **OTHER**

5. Type of Proposed Operations (Check all that apply)

<p align="center"><b>For Hire Carrier</b></p> PROPERTY (Not Deleterious, Hazardous or Passengers) <input type="checkbox"/> Restricted <input type="checkbox"/> Unrestricted <input type="checkbox"/> 10,001 GVWR or under DELETERIOUS OR HAZARDOUS <input type="checkbox"/> Deleterious Substances (also requires TDF 14) <input type="checkbox"/> Hazardous Materials \$5 million (may also require Haz Waste appl.) <input type="checkbox"/> Hazardous Materials \$1 million in (may also require Haz Waste appl.) PASSENGERS <input type="checkbox"/> Vehicle Seating Capacity of 16 or more passengers <input type="checkbox"/> Vehicle Seating Capacity of 15 passengers or less <input type="checkbox"/> Taxicab Service	<p align="center"><b>Private Carrier</b></p> PROPERTY (Not Deleterious, Hazardous or Passengers) <input type="checkbox"/> Property DELETERIOUS OR HAZARDOUS <input type="checkbox"/> Deleterious Substances (also requires TDF 14) <input type="checkbox"/> Hazardous Materials \$5 million (may also require Hazardous Waste application) <input type="checkbox"/> Hazardous Materials \$1 million in (may also require Hazardous Waste application)
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6. Do you conduct interstate operations (across state lines)?  YES or  NO    Are you registered in the UCR program?  YES or  NO  
7. Do you intend to operate vehicles with a GVWR, GCWR, loaded weight or registered weight over 26,000 pounds?  YES or  NO  
8. Complete Attachment "A" Parts 2 through 5.  
9. Quantity of Identification Devices. Stamps \_\_\_\_\_  
10. Rule Book Serial No. \_\_\_\_\_

The Applicant hereby declares that it has knowledge of and understands the rules of the Oklahoma Corporation Commission governing transportation by motor carriers and private carriers; that said rules and regulations will be observed and complied with fully in the exercise of any and all rights acquired through the permission to operate as hereby applied for; and that under penalty of perjury, all statements and representations appearing in the foregoing application and all addendums are based upon my knowledge of the matters referred to and are true and correct. A provisional license is requested upon the applicant meeting basic requirements for issuance thereof.

Applicant's Signature \_\_\_\_\_  
Applicant's Title \_\_\_\_\_  
Attorney's Signature (if any) \_\_\_\_\_  
Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_,  
My Commission expires \_\_\_\_\_ Notary # \_\_\_\_\_ Notary Public \_\_\_\_\_

**OKLAHOMA CORPORATION COMMISSION**  
**TRANSPORTATION DIVISION**  
**P.O. BOX 52000 OKLAHOMA CITY, OK 73152-2000**  
**JIM THORPE OFFICE BUILDING, 2101 N. LINCOLN BLVD., ROOM 312 (ZIP CODE 73105)**  
**TELEPHONE (405) 521-2251 FAX NO. (405) 521-2916**  
**INTERNET ADDRESS <http://www.occeweb.com>**

Please keep a copy of this completed application in your office. In the event we have any questions about your application and contact you, it will be helpful as a reference tool. This application requires a hearing. If you comply with all requirements, your presence at the hearing will not be required (unless protested). Please make your check or money order payable to the Oklahoma Corporation Commission. All fees may be remitted in one check / money order. The application must be signed and notarized.

1. Original **notarized** application must be filed with all attachments. Application must be submitted with **\$100 filing fee**. Please print or type application. Application cannot be filed in a trade name only. A "dba" (doing business as) may be indicated, but applicant must be a legal entity (individual, corporation, partnership, etc.). If a partnership, the applicant must reflect the names of each of the partners. The Applicant's USDOT number must be listed on this application, or if not yet issued, a copy of the completed MCS-150 mailed to USDOT must be attached. An Applicant operating solely intrastate must apply for an intrastate USDOT number, issued by this Commission utilizing a TDF 19 application. The company's FEIN or individuals SSN must be listed.
2. Address and Contact Information. The Mailing Address 1 is the location where all correspondence is to be mailed to (permit service, attorney's office, carrier's address or other location may be listed). If the address listed in Mailing Address 1 is not the carrier's address, the carrier's address must be listed in the Mailing Address 2 column. Physical Address is for the carrier's actual physical location. If an out-of-state address, provide physical address of proposed/actual major Oklahoma terminal or Oklahoma home office in domicile county area.
3. If Applicant is other than a Sole Proprietorship and its principal place of business is Oklahoma, the Applicant must be properly filed with the Oklahoma Secretary of State's office (405) 521-3911 and a copy of the certificate of incorporation or similar paper must be submitted. If the **principal place of business** is other than Oklahoma, you must provide the name and address of your Oklahoma Process Agent or attach a copy of your BOC-3 Process Agent Listing.
5. Type of Proposed Operations. Please check all that apply. Minimum liability insurance limits are based upon your type of operations. See "Liability Insurance" below. If more than one category is marked, the highest liability insurance limit is required.
6. If you operate a "commercial motor vehicle" transporting interstate (across state lines) shipments you are subject to the Unified Carrier Registration Program. A "commercial motor vehicle" is defined as a self-propelled or towed vehicle used on the highway in interstate commerce principally to transport passengers or cargo, if the vehicle: (a) has a gross vehicle weight rating or gross combination weight rating, or gross vehicle weight or gross combination weight of 10,001 pounds or more, whichever is greater; (b) is designed or used to transport 8 or more passengers (including the driver) for compensation; (c) is designed or used to transport 15 or more passengers (including the driver) and is not used to transport passengers for compensation; or (d) is used in transporting hazardous materials in a quantity requiring placarding.
7. If you intend to operate vehicles with a Gross Vehicle Weight Rating (GVWR) as specified by the manufacturer, Gross Combination Weight Rating (GCWR), loaded weight or registered weight thereof over 26,000 pounds; placarded amounts of hazardous materials or passengers 15 or more, you will be subject to federal safety regulations and a safety review.
9. Ordering of annual identification devices. Please remit **\$7.00** for each **identification device** - one device is required for each vehicle. Additional identification devices may be ordered throughout the year using application TDF 16 or a written letter.
10. Every intrastate motor carrier must possess a current OCC Chapter 30 rule book. Rule books are available at a cost of **\$10** per rule book (notices of rule changes will be provided), or you may download the document from our website (you must specify on the application you have the rule book in your possession). If your rule book serial number is **37000** or higher, you already possess the most current rule book.

**A provisional license to operate pending issuance or denial of your license will be automatically issued upon the meeting of basic requirements (application properly completed, filing fees paid, insurance placed on file and an Educational Compliance Workshop scheduled (if needed). Conducting operations prior to obtaining the provisional may result in a citation being issued.** Information on scheduling an Educational Compliance Workshop will be mailed to you immediately after initial review of your application. Provisional licenses can only be faxed with a \$6.00 facsimile fee paid in advance.

**Liability Insurance** - An insurance filing (typically a **Form E** or **Form G**) must be filed with this office as proof of liability insurance. The name, address and liability limits must match the information shown on the front of this application. You may need to contact your insurance agent to inform the insurance company to provide the insurance filing to this office (agents do not typically provide the required filing). Liability insurance requirements are combined single limits as follows:

- Property (for hire)
  - Unrestricted - \$750,000
  - Restricted (Sand, rock, gravel, asphaltic mixtures and similar road building materials; Unprocessed forestry products; Unprocessed agricultural commodities; Ordinary livestock) - \$350,000
  - Under 10,000 pounds GVWR - \$300,000
- Property (private carrier) - \$350,000
- Deleterious substances (non hazardous) - \$750,000:
- Taxicab service utilizing vehicles having a seating capacity of 6 passengers or less not operated on a regular route or between specified points - \$100,000; 15 passengers or less, other than taxicab service-\$1,000,000; 16 or more passengers-\$5,000,000. Seating capacity includes the driver.
- Hazardous materials as defined in and as required by OAC 165:30-3-11 and 49 CFR Part 387.

# TDF 1 ATTACHMENT "A"

**PART 1 LEGAL ENTITY INFORMATION** (other than an individual/sole proprietorship)

Corporation  Partnership  Other (please list) \_\_\_\_\_

Date of Incorporation \_\_\_\_\_ State of Incorporation \_\_\_\_\_

**Attach copy of document/cover page filed with the Secretary of State or Partnership agreement.**

Name of Officer /Partner	Title of Officer /Partner	Address of Officer /Partner

**PART 2 SAFETY SUMMARY REPORT**

1. Does applicant intend to operate vehicles with a GVWR or GCWR over 26,000 pounds?  YES or  NO
2. Does applicant intend to transport hazardous materials requiring placarding?  YES or  NO
3. Does applicant intend to transport hazardous waste requiring a uniform manifest?  YES or  NO
4. Are your CDL drivers employees and/or owner/operators?  Employees  Owner/Operators  Do not have CDL drivers

**If you answered "NO" to both Questions 1 and 2 of this attachment, skip to PART 4.**

5. Provide Applicant's USDOT safety rating :

- No safety rating  Unsatisfactory  Conditional  Satisfactory  Do not know

6. Safety certification (applicant initials in area provided to certify compliance)

The applicant certifies the federal motor carrier safety regulations, as adopted by the State of Oklahoma, will be observed and complied with fully in the exercise of any and all rights acquired through the permission to operate as hereby applied for.	Initials

**PART 3 SIZE AND WEIGHT SUMMARY REPORT** (applicant initials in area provided to certify compliance)

The applicant certifies the size and weight law as set forth by the State of Oklahoma, will be observed and complied with fully in the exercise of any and all rights acquired through the permission to operate as hereby applied for.	Initials

**PART 4 TYPES OF TRANSPORTATION TO BE PERFORMED**

**OPERATIONAL INFORMATION**

Mark the type of commodities anticipated to be most generally transported (check all that apply).

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> Courier Service<br><input type="checkbox"/> Livestock, ordinary<br><input type="checkbox"/> Sand, rock, gravel<br><input type="checkbox"/> Unprocessed agricultural or forestry products<br><input type="checkbox"/> Manure<br><input type="checkbox"/> Automobiles/motor vehicles<br><input type="checkbox"/> Beer and alcoholic beverages<br><input type="checkbox"/> Boats<br><input type="checkbox"/> Bio-medical waste<br><input type="checkbox"/> Cement and fly ash<br><input type="checkbox"/> Coal/coke | <input type="checkbox"/> Deleterious substances<br><input type="checkbox"/> Driveaway/towaway<br><input type="checkbox"/> Electric transmission & communications equipment<br><input type="checkbox"/> Feed and feed ingredients<br><input type="checkbox"/> Garbage, refuse, trash<br><input type="checkbox"/> Groceries, processed food, frozen food<br><input type="checkbox"/> Household goods, new<br><input type="checkbox"/> Household goods, used<br><input type="checkbox"/> Houses<br><input type="checkbox"/> Lumber, building and construction materials | <input type="checkbox"/> Hazardous Materials (complete section below)<br><input type="checkbox"/> Mobile home, portable buildings<br><input type="checkbox"/> Oilfield/heavy equipment and articles/large objects<br><input type="checkbox"/> Paper and paper products<br><input type="checkbox"/> Passengers, specify largest seating capacity including driver _____<br><input type="checkbox"/> Retail commodities<br><input type="checkbox"/> Scrap metal and recyclable materials<br>Other _____ |
|---|--|---|

Note: Information on Poison Inhalation Hazards is found in column (7) of the hazardous materials table (49 CFR 172.101)

**INTRA / INTER HAZARDOUS MATERIALS CARRIERS/SHIPPERS - ARE YOU REGISTERED WITH RSPA?**

Please refer to 49 CFR , Part 107.601 regarding the applicability of registration of persons who offer or transport Hazardous Materials. If you meet the criteria listed, call Research and Special Programs Administration (RSPA) of the Federal Highway Administration at (202) 366-4109 for the appropriate application forms or download from <http://www.rspa.dot.gov> .

**HAZARDOUS MATERIALS**

Mark the Division/type of hazardous materials anticipated to be most generally transported - (check all that apply)

- Div 1.1 Explosives (with mass explosion hazard)
- Div 1.2 Explosives (with projection hazard)
- Div 1.3 Explosives (with predominantly fire hazard)
- Div 1.4 Explosives (with no significant blast hazard)
- Div 1.5 Very insensitive explosives; blasting agents
- Div 1.6 Extremely insensitive detonating substances
- Div 2.1 Flammable gas
- Div 2.1 LPG (Liquified Petroleum Gas)
- Div 2.1 Methane Gas
- Div 2.2 Non-flammable compressed gas
- Div 2.2 A (Anhydrous Ammonia)
- Div 2.3 A (Poison Gas which is Poison inhalation Hazard (PIH) Zone A)
- Div 2.3 B (Poison Gas which is PIH Zone B)
- Div 2.3 C (Poison Gas which is PIH Zone C)
- Div 2.3 D (Poison Gas which is PIH Zone D)
- Class 3 Flammable and combustible liquid
- Class 3 A (Flammable liquid which is a PIH Zone A)
- Class 3 B (Flammable liquid which is a PIH Zone B)
- Combustible Liquid (Refer to 49 CFR 173.120 (b))
- Div 4.1 Flammable solid
- Div 4.2 Spontaneously combustible material
- Div 4.3 Dangerous when wet material
- Div 5.1 Oxidizer
- Div 5.2 Organic peroxide
- Div 6.1 A (Poison Liquid which is a PIH Zone A)
- Div 6.1 B (Poison Liquid which is a PIH Zone B)
- Div 6.1 Poison (Poisonous liquid with no inhalation hazard)
- Div 6.1 Solid (meets the definition of a poisonous solid)
- Div 6.2 Infectious substance (Etiologic agent)
- Class 7 Radioactive material
- HRCQ (Highway Route Controlled Quantity of Radioactive material)
- Class 8 Corrosive material
- Class 8 A (Corrosive liquid which is a PIH Zone A)
- Class 8 B (Corrosive liquid which is a PIH Zone B)
- Class 9 Miscellaneous hazardous material
- Elevated Temperature Material (Meets definition in 49 CFR 171.8 for an elevated temperature material)
- Infectious Waste (Meets definition in 49CFR 171.8 for an infectious waste)
- Marine Pollutants (Meets definition in 49 CFR 171.8 for a marine pollutant)
- Hazardous Sub (RQ) (Meets definition in 49 CFR 171.8 of a reportable quantity of a hazardous substance)
- Hazardous Waste (Meets definition in 49 CFR 171.8 of a hazardous waste)
- ORM (Meets definition in 49 CFR 171.8 of Other Regulated material)

**PART 5 EQUIPMENT LISTING / TERMINAL & DOCK FACILITIES**

List the following information for all vehicles (power units) and equipment (trailers) operated under the license. Attach additional pages if necessary. A computer printout listing the information required may be submitted in lieu of completing this subsection. If total equipment (owned plus leased) listed on is equal to 30 or more vehicles, you may omit this item, provided the applicant agrees to furnish a listing upon request **and** makes a statement to this regard.

**POWER UNITS**

Vehicle I.D. Number (VIN)	Year	Make	Type *	GVWR or Capacity	Tag No. & State	Owned or Leased

\* Type of power units such as Straight Truck (ST), Truck Tractor (TT), Pickup (PU), Limousine, Taxi, Car, etc.

**EQUIPMENT / TRAILERS**

Vehicle I.D. Number (VIN)	Year	Make	Type **	GVWR or Capacity	Tag No. & State	Owned or Leased

\*\* Type of Equipment or Trailers such as Gooseneck, Flatbed, Box, Belly Dump, Pole Trailer, etc.

**DESCRIPTION OF TERMINAL or DOCK** (If you do not maintain a terminal, dock or motor pool facility, please list the physical address (physical location) where vehicles are parked when not in use):

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