



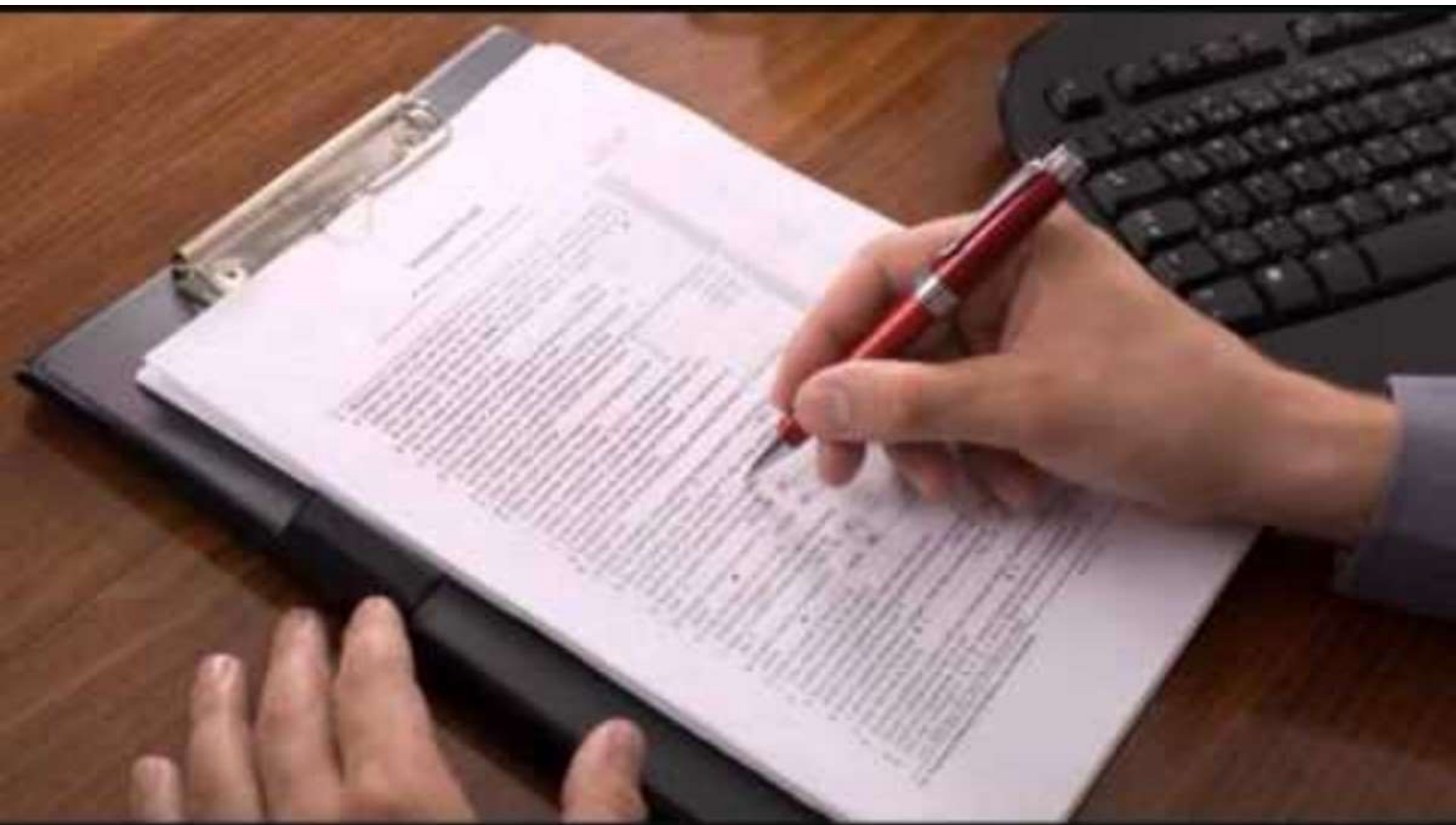
International Registration Plan (IRP)





Topics

- What is an apportionable vehicle?
- Renewal Process
 - Renewal Requirements
 - Renewal Checklist
 - Copy of IRP Renewal
 - When to Renew
 - Completing The Renewal Process
 - Renewal Processing Time
 - Methods of Payment
- IRP Transactions
 - Raleigh and Charlotte State Offices
 - License Plate Agencies
- Unified Carrier Registration





WHAT IS AN APPORTIONABLE VEHICLE?

- Vehicles used or intended for use in two or more member jurisdictions that allocate or proportionally register vehicles and is used for the transportation of persons for hire or designed, used or maintained primarily for the transportation of property.
- **EXCEPTIONS:** Recreational vehicles, vehicles displaying restricted plates, city pick-up and delivery, and government owned vehicles.



IRP RENEWAL PROCESS





RENEWAL REQUIREMENTS

- Signed and completed IRP Renewal Application.

Including:

- Mileage totaled by state for reporting period indicated on Renewal-M – line 3. IFTA reports are now required
- USDOT Number must be active
- Motor Carrier Number must be active
- If Corporation, must be current-active through NC Secretary of State
- FHL Carriers must provide Lease Agreement and Current Insurance Card every renewal
- Stamped receipted Schedule 1 of the Form 2290
 - Failure to furnish the required 2290 will result in the cancellation of your apportioned license plate.

ACCOUNT _____ FLEET _____ APPORTIONED RENEWAL CHECKLIST
--

AVOID DELAYS: READ this checklist. COMPLETE the renewal application. COMPARE the completed application with the items on this checklist to ensure accuracy.

Please provide the necessary documents to CLEAR the STOPS. Without them, we may be unable to Renew the vehicle and/or fleet!

SCHEDULE REN-A

ACCOUNT INFORMATION

1. ACCOUNT NAME(S): If a name is changing, please call the IRP office for instructions. Each type of name change may require different documents.
2. ACCOUNT ADDRESSES: For the HEADQUARTERS Office for all fleets in this account.
PHYSICAL: always a street or road location in NC. PO Box is NOT allowed.
MAILING: PO Box IS allowed, and IS NOT limited to NC.
3. ACCOUNT CONTACT PERSON: Person or service (in the headquarters office) to contact by phone or fax. MAY BE DIFFERENT FOR EACH FLEET.
4. DISCLOSURE/PRIVACY: Mark the block with an X to ensure that your personal information (ie. name & address, etc.) is kept private by the DMV.
5. SIGNATURE: Sign & Date the form.

SCHEDULE REN-F

FLEET INFORMATION

1. FLEET ADDRESSES: OFFICE/TERMINAL location for all vehicles operating in this fleet.
PHYSICAL: always a street or road location in NC. PO Box is NOT allowed.
MAILING: PO Box IS allowed, and is NOT limited to NC.
2. FLEET CONTACT PERSON: Person (fleet administrator) or Service (at the fleet level) to contact by phone or fax for information about this fleet.
3. FLEET TYPE: If the type is changing, please call the IRP for instructions. Each fleet type requires different documents.
4. COMMODITY CLASS: If the kind of goods you haul changes, please call the IRP for instructions. Documents may be required.
5. FOR-HIRE LEASED CARRIERS: Are required to submit a copy of lease agreement & authority holders insurance card. Form-E may be required if you carry the full liability insurance on vehicle when loaded.
6. INSURANCE CERTIFICATION: Write in the insurance co name & policy number which covers the vehicle(s) in this fleet with FULL LIABILITY.
Change of insurance may require you to submit proof of insurance documents. Please call IRP for specific instructions.
7. SIGNATURE: Sign and Date the form

SCHEDULE REN-M

MILEAGE INFORMATION

1. MILEAGE REPORTING YEAR: Refer to mileage reporting period on Schedule M forms.
2. JURISDICTION MILEAGE: If no actual miles for reporting period mark YES for compute average distance and you will be assessed a fee for each jurisdiction. You should continue to keep your mileage records.
3. MILEAGE TOTALS: Add the miles from the ACTUAL column on pages 1 & 2 and write it on the ACTUAL line. Enter GRAND TOTAL from pages 1 and 2.
4. MILEAGE CERTIFICATION: Read, Sign, & Date the form.

SCHEDULE REN-W

WEIGHT GROUP INFORMATION

1. WEIGHT GROUP NUMBER: Displays the weight group number from previous year. SHOULD NOT BE CHANGED.
2. NUMBER OF VEHICLES IN THIS WEIGHT GROUP: Displays the number of active vehicles in this weight group at the print date.
SHOULD BE CHANGED if vehicles were/are added to or deleted from the weight group since the print date.
3. UNIT/EQUIPMENT NUMBERS ASSIGNED TO THIS WEIGHT GROUP: Displays the unit numbers for active vehicles in this fleet at the print date.
TO DELETE A UNIT: draw one line through the unit number on this schedule, and line through it on the equipment schedule (REN-E)
TO ADD A UNIT: write in the unit number on this schedule and complete the equipment additions schedule (REN-EA).
4. NORTH CAROLINA WEIGHT: Displayed from the previous year. Also indicates if this is a FIXED weight group (NC & all other jurisdictions have the SAME weight and CANNOT BE CHANGED) or VARIABLE weight group (weights in other jurisdictions may vary within 10% of NC weight and MAY BE CHANGED). If a VARIABLE weight group is changed, ALL VEHICLES in that weight group are changed. WEIGHT CHANGE FOR A VEHICLE WITHIN A WEIGHT GROUP requires delete from the current weight group and add to the other/new weight group. CAUTION: Weight changes which took place after the PRINT DATE should be indicated on your renewal.
5. SIGNATURE: Sign & Date the form.

SCHEDULE REN-E

EQUIPMENT INFORMATION

1. VERIFY equipment information. MAKE necessary corrections including WEIGHT GROUP NUMBER if it changes.
SEE ARTICLE NO. 4 IN THE SECTION ABOVE FOR INSTRUCTIONS.
2. DELETE (draw one line through) any vehicle you do not wish to renew. Be sure to delete vehicles you took out of service after the PRINT DATE.
3. ADD vehicles to this renewal (use form REN-EA) which were put into service after the Print Date.
4. ENCLOSE FORM 2290 SCH 1: proof of payment for Federal Heavy Vehicle Use Tax for the current tax year on vehicles with a declared weight of 55000 pounds or more.



STATE OF NORTH CAROLINA
DEPARTMENT OF TRANSPORTATION

ROY COOPER
GOVERNOR

J.R. "JOEY" HOPKINS
SECRETARY

Process Your IRP Renewal via The Internet!

**You can renew your International Registration Plan (IRP) Renewal via the Internet.
The system will be available as of _____ for your convenience.**

You may view the Online Services offered by DMV by going to the DMV website at:

www.ncdot.gov/dmv/

Click on **Programs** and then click on **IRP Renewals** and then click on **TRANSEXPRESystem
Renewal** to view the services offered for motor carriers. Click on **International Registration Plan** to begin your renewal. When you get to the Login screen, click on **"First Time User/Initial Access Setup"** and follow the instructions. **To set up your Internet account, use the information listed at the bottom of this page.**

**** You may complete your IRP Renewal via the Internet or you may elect to process your renewal, create an invoice and then stop prior to payment and send your check for payment to the Raleigh or Charlotte IRP office for completion.**

If you have any questions, please call the Raleigh Office at 919-615-6700.

Mailing Address:
NC DEPARTMENT OF TRANSPORTATION
INTERNATIONAL REGISTRATION PLAN
1425 ROCK QUARRY ROAD SUITE 100
RALEIGH, NC 27610

Telephone: (919) 615-6700
Fax: (919) 733-5300

Website: www.ncdot.gov

North Carolina Division of Motor Vehicles

TYPE OR PRINT (blue or black ink)

APPORTIONED RENEWAL APPLICATION

PRINT DATE: _____

1. FIRST REGISTRANT	US DOT NUMBER: _____	Draw one line through the information to be corrected and write in the correction.
TYPE (check one) <input type="checkbox"/> I (individual) or <input type="checkbox"/> B (business)		
REGISTRANT ID: _____ RELATIONSHIP: * _____ SSN: _____ FEIN: _____		
Individual Name (First, Middle, Last, Suffix / Sr, Jr, I, II, etc.) _____		
Business name _____		
ACCOUNT PHYSICAL ADDRESS (must be street or road in NC) PO BOX IS NOT VALID		

City: _____ State: _____ Zip: _____ County: _____		
ACCOUNT MAILING ADDRESS (if different from physical address) PO BOX IS VALID		

City: _____ State: _____ Zip: _____		
ACCOUNT CONTACT PERSON: _____		
Phone: _____ Ext: _____ Alternate Phone: _____ Fax: _____		

2. SECOND REGISTRANT
TYPE (check one) <input type="checkbox"/> I (individual) or <input type="checkbox"/> B (business)
REGISTRANT ID: _____ RELATIONSHIP: * _____ SSN: _____ FEIN: _____
Individual Name (First, Middle, Last, Suffix / Sr, Jr, I, II, etc.) _____
Business name _____

3. ** RELATIONSHIP NAME (Complete only if a relationship is indicated in Section 1 and / or 2)
TYPE (check one) <input type="checkbox"/> I (individual) or <input type="checkbox"/> B (business)
REGISTRANT ID: _____ SSN: _____ FEIN: _____
Individual Name (First, Middle, Last, Suffix / Sr, Jr, I, II, etc.) _____
Business name _____

4. DISCLOSURE SECTION (Privacy) In 1997, the North Carolina Legislature passed a bill, which allows citizens to protect the personal information contained in the records of the Division of Motor Vehicles. Failure to check the block below will allow the Division of Motor Vehicles to release your name and address for marketing and solicitation after July 1, 1999.
<input type="checkbox"/> I (We) would like the personal information contained in this application NOT TO BE RELEASED.
SIGNATURE: _____ DATE: ____/____/____
MUST BE SIGNED IN INK BY ACCOUNT HOLDER OR AUTHORIZED REPRESENTATIVE OF FIRM OR BUSINESS

* A RELATIONSHIP MAY EXIST FOR THE FIRST OR SECOND REGISTRANT OR BOTH
IF A RELATIONSHIP EXISTS FOR THE FIRST and SECOND REGISTRANTS, IT MUST BE THE SAME.

DBA: Doing business as **DIV:** A Division of **TRU:** Trustee **GUA:** Guardian **CUS:** Custodian **LIF:** For life then **JTW:** Joint w right of survivorship

**ENTER THE FULL NAME OF THE RELATIONSHIP IN SECTION 3.

OFFICE USE
ACCOUNT NUMBER: _____

NORTH CAROLINA APPORTIONED REGISTRATION RENEWAL APPLICATION

ACCOUNT NUMBER: NC _____ FLEET NUMBER: _____ SUPPLEMENT NUMBER: 0000

EFFECTIVE DATE: _____ EXPIRATION DATE: _____ RENEWAL MONTH _____

RENEWAL SCHEDULE F

FLEET INFORMATION

PRINT DATE: _____

1. FLEET ADDRESSES

PHYSICAL: (ST or RD) _____

CITY: _____ STATE: NC ZIP: _____ COUNTY: _____

MAILING: (PO BOX etc) _____

CITY: _____ STATE: _____ ZIP: _____

CORRECTIONS ?

Draw one line through the information to be corrected, and write in the correction.

2. FLEET CONTACT PERSON:

PHONE: _____ EXT: _____ ALTERNATE PHONE: _____ FAX: _____

INTERNET ADDRESS: _____

CORRECTIONS ?

Draw one line through the information to be corrected, and write in the correction.

3. FLEET TYPE

- ☐ PRIVATE
- ☐ COMMON CARRIER
- ☐ CONTRACT CARRIER
- ☐ FOR HIRE EXEMPT
- ☐ FOR HIRE LEASED
- ☐ FOR HIRE RENTAL

TO CHANGE FLEET TYPE: Place an X in the appropriate block and provide insurance & authority filings if necessary.

- ☐ PRIVATE Hauls property belonging only to this Account Holder.
- ☐ COMMON CARRIER Hauls federally regulated property/passengers under FHWA/MC Number _____
- ☐ CONTRACT CARRIER Hauls federally regulated property under FHWA/MC Number _____
- ☐ FOR HIRE EXEMPT Hauls property (exempt from federal regulation) interstate. (Form E required)
- ☐ FOR HIRE LEASED Hauls property interstate operating under another carrier's authority FHWA/MC Number * _____
- ☐ FOR HIRE RENTAL Rents vehicles to others for transporting property. (Form E required)

* When the vehicle is loaded, do you carry full liability insurance? ☐ NO - If not registered in NC: enter base state of authority holder _____ (copy of Lease Agreement & Insurance ID required)
☐ YES - I am using my own insurance (Form E & copy of Lease Agreement. required)

ALLOCATED FLEETS

- ☐ ONE-WAY RENTAL TRUCKS Minimum Number of Trucks: _____ (See Form IRPTA-21) GVWR (NC WT) _____
- ☐ POOL FLEET TRAILERS Minimum Number of Trailers: _____ (See Form IRPTA-19) GVWR (Greater than 6,000 pounds) (from previous year)

4. COMMODITY CLASS (from previous year)

- ☐ ALL COMMODITIES
- ☐ LOGS
- ☐ EXEMPT
- ☐ HOUSEHOLD GOODS
- ☐ PASSENGER BUS

TO CHANGE COMMODITY CLASS: Place an X in the appropriate block.

- ☐ ALL COMMODITIES All Kinds of Commodities/Goods: to be used with fleet types PVT, COM, CON, or FHL only
- ☐ LOGS Logs: to be used with fleet types PVT or FHE only
- ☐ EXEMPT Interstate Exempt Commodities/Goods: to be used with fleet types FHE or FHR only
- ☐ HOUSEHOLD GOODS Household Goods Mover: to be used with fleet type COM only
- ☐ PASSENGER BUS Passengers: to be used with fleet type COM only

5. INSURANCE CERTIFICATION: I certify that I have Financial Responsibility as required by law for the motor vehicles operating in this fleet.

Insurance Co Name: _____ Insurance Policy Number: _____

OFFICE USE

INS CO CODE: _____

6. SIGNATURE

 DATE: _____

MUST BE SIGNED IN INK BY ACCOUNT HOLDER OR AUTHORIZED REPRESENTATIVE OF FIRM OR BUSINESS

NORTH CAROLINA APPORTIONED REGISTRATION RENEWAL APPLICATION

ACCOUNT NUMBER NC _____ **FLEET NUMBER** _____ **SUPPLEMENT NUMBER 0000**
REGISTRATION PERIOD _____ **EFFECTIVE DATE** _____ **EXPIRATION DATE** _____

RENEWAL SCHEDULE E **EQUIPMENT INFORMATION** **PAGE** _____ **OF** _____ **PRINT DATE** _____

NUMBER OF VEHICLES IN THIS FLEET		TR		TK		TL		BU								
STOPS	EQUIP NUMBER	PLATE NUMBER	ST BODY	YEAR	MAKE	VEHICLE IDENTIFICATION NUMBER (PRIMARY & SECONDARY)	TAX CNTY	AXLES	SEATS	CO OVER 10000 MILES	TITLE OR CONTROL NUMBER	WGT GRP# F - FIX V - VAR	UNL EMPTY WGT	** Y/N	*USDOT#	*TIN
1																
2																
3																
4																
5																
6																
7																
8																
9																
10																
11																
12																
13																
14																
15																
16																
17																
18																
19																
20																

** Is the control and responsibility for the safety of this vehicle expected to change?

*USDOT# Number of the person responsible * TIN (Taxpayer ID#) Either the SSN(Social Security#) or
for the safe operation of the vehicle FEIN(Fed Employer ID#) used when applying for the USDOT#

STOPS: I = INSURANCE C = CHILD SUPPORT D = DWI B = BAD CREDIT R = REG CORRE T = TAX S = STOLEN O = TOLL H = SHP G = GLOBAL M = MULTIPLE U = SCH. BUS P = AOC BUS

***** TO ADD VEHICLES ***** USE THE ATTACHED FORM RENEWAL SCHEDULE EA	NUMBER TO MODIFY	NUMBER TO DELETE	NUMBER TO RENEW
	THIS PAGE:	THIS PAGE:	THIS PAGE:
	ALL PAGES:	ALL PAGES:	ALL PAGES:

North Carolina Division of Motor Vehicles
APPORTIONED RENEWAL MILEAGE APPLICATION

1. IRP ACCOUNT NUMBER: _____ FLEET NUMBER: _____

OFFICE USE
SUPPLEMENT NUMBER: **0000**

2. REGISTRATION PERIOD: EFFECTIVE DATE _____ EXPIRATION DATE: _____

3. MILEAGE REPORTING YEAR: JULY 01, _____ THROUGH JUNE 30, _____

4. JURISDICTION MILEAGE (continued on page 2)

* LIST ACTUAL MILES in the ACTUAL MILES column for each state traveled by all vehicles in this fleet during the mileage-reporting period.

* COMPUTE AVERAGE VEHICLE DISTANCE ☐ Yes ☐ No Use AVERAGE VEHICLE DISTANCE if First Renewal or No Actual mileage traveled during the mileage reporting period.

	OFFICE USE	ACTUAL MILES	AVERAGE VEHICLE DISTANCE MILES		OFFICE USE	ACTUAL MILES	AVERAGE VEHICLE DISTANCE MILES
AK ALASKA				LA LOUISIANA			
AL ALABAMA				MA MASSACHUSETTS			
AR ARKANSAS				MD MARYLAND			
AZ ARIZONA				ME MAINE			
CA CALIFORNIA				MI MICHIGAN			
CO COLORADO				MN MINNESOTA			
CT CONNECTICUT				MO MISSOURI			
DC DST OF COLUMBIA				MS MISSISSIPPI			
DE DELAWARE				MT MONTANA			
FL FLORIDA				NC NORTH CAROLINA			
GA GEORGIA				ND NORTH DAKOTA			
IA IOWA				NE NEBRASKA			
ID IDAHO				NH NEW HAMPSHIRE			
IL ILLINOIS				NJ NEW JERSEY			
IN INDIANA				NM NEW MEXICO			
KS KANSAS				NV NEVADA			
KY KENTUCKY				NY NEW YORK			

THIS IS A TWO-PART FORM. PLEASE CONTINUE TO THE NEXT PAGE.

RENEWAL SCHEDULE M

(Rev. 02/21)

TYPE OR PRINT (blue or black ink)

North Carolina Division of Motor Vehicles

APPORTIONED RENEWAL MILEAGE APPLICATION

PAGE 2 OF 2

1. IRP ACCOUNT NUMBER: _____ FLEET NUMBER: _____

OFFICE USE

SUPPLEMENT NUMBER: **0000**

2. REGISTRATION PERIOD: EFFECTIVE DATE _____ EXPIRATION DATE: _____

3. MILEAGE REPORTING YEAR: JULY 01, _____ THROUGH JUNE 30, _____

4. JURISDICTION MILEAGE (continued from page 1)

		OFFICE USE	ACTUAL MILES	AVERAGE VEHICLE DISTANCE MILES			OFFICE USE	ACTUAL MILES	AVERAGE VEHICLE DISTANCE MILES
OH	OHIO				AB	ALBERTA			
OK	OKLAHOMA				BC	BRITISH COLUMBIA			
OR	OREGON				MB	MANITOBA			
PA	PENNSYLVANIA				NB	NEW BRUNSWICK			
RI	RHODE ISLAND				NF	NEWFOUNDLAND			
SC	SOUTH CAROLINA				NS	NOVA SCOTIA			
SD	SOUTH DAKOTA				NT	NORTHWEST TERR			
TN	TENNESSEE				ON	ONTARIO			
TX	TEXAS				PE	PRINCE EDWARD IS			
UT	UTAH				QC	QUEBEC			
VA	VIRGINIA				SK	SASKATCHEWAN			
VT	VERMONT				YT	YUKON TERRITORY			
WA	WASHINGTON								
WI	WISCONSIN								
WV	WEST VIRGINIA								
WY	WYOMING				MX	MEXICO			

MILEAGE TOTALS

(pages 1 & 2)

ACTUAL: _____ AVERAGEDISTANCE: _____ GRAND TOTAL: _____

5. MILEAGE CERTIFICATION: I CERTIFY THE MILEAGE ON THIS SCHEDULE REPRESENTS THE ACTUAL MILES FOR THE VEHICLES OPERATING IN THIS FLEET.
I AM DECLARING THE AVERAGE VEHICLE DISTANCE MILEAGE FORMULA.

SIGNATURE: _____ DATE: ____/____/____

MUST BE SIGNED IN INK BY ACCOUNT HOLDER OR AUTHORIZED REPRESENTATIVE OF FIRM OR BUSINESS

1. IRP ACCOUNT NUMBER: _____
FLEET NUMBER: _____

SUPPLEMENT NUMBER: 0000 (system generated)	OFFICE USE
---	------------

2. REGISTRATION PERIOD	EFFECTIVE DATE: _____	EXPIRATION DATE: _____
------------------------	-----------------------	------------------------

3. WEIGHT DECLARATION								NORTH CAROLINA WEIGHT: _____		<div>OFFICE USE WT GRP NUMBER _____ (system generated)</div>	
FIXED WEIGHT: Do you carry the same weight in ALL your apportioned jurisdictions AS IN NORTH CAROLINA?											
<input type="checkbox"/> YES (It is NOT necessary to write the weights in each jurisdiction.)											
<input type="checkbox"/> NO (It IS necessary to write what you want in EACH jurisdiction.)											
ALL WEIGHTS MUST BE WITHIN 10% OF THE NORTH CAROLINA WEIGHT										(EXCEPTION: Passenger /Bus Fleets)	
JUR	WEIGHT	JUR	WEIGHT	JUR	WEIGHT	JUR	WEIGHT	JUR	WEIGHT		
AK		GA		ME		NM		TN			
AL		IA		MI		NV		TX			
AR		ID		MN		NY		UT			
AZ		IL		MO		OH		VA			
CA		IN		MS		OK		VT			
CO		KS		MT		OR		WA			
CT		KY		ND		PA		WI			
DC		LA		NE		RI		WV			
DE		MA		NH		SC		WY			
FL		MD		NJ		SD					

NON-US JURISDICTIONS									
AB		NB		NT		QC		MX	
BC		NF		ON		SK			
MB		NS		PE		YT			

4. EQUIPMENT (UNIT) NUMBERS (8 character maximum). Up to 100 vehicles may be added on this schedule. Use additional schedules for more than 100 units. List equipment/unit number for the vehicles operating with the WEIGHTS (weight group) declared on this schedule.									

5. HOW MANY VEHICLES WILL BE PROCESSED FOR THIS WEIGHT GROUP	(this supplement) _____
--	-------------------------

6. SIGNATURE: _____	DATE: ____/____/____
MUST BE SIGNED IN INK BY ACCOUNT HOLDER OR AUTHORIZED REPRESENTATIVE OF FIRM OR BUSINESS	



When to Renew

The renewal application will be sent via mail

Once you receive the renewal application it can be processed 60 days prior to your expiration date.



Completing the Renewal Process

There are three methods by which you can process your renewal:

- Raleigh or Charlotte IRP Offices
- Via the Internet – www.ncdot.gov/dmv
 - Payment process EFT or local IRP License Plate agencies
- Mail

Reminder:

- You cannot process your IRP Renewal at your local License Plate Agencies
- You can only payout an IRP renewal at a local IRP License Plate Agency that was originally processed via the IRP online renewal system



Renewal Processing Time

- If using the Internet, due to processing time, **10-14 business days** are required if having cab cards mailed.
- If renewing by mail, due to processing procedures please allow ample time for processing. Once your IRP Renewal is received and processed an invoice will be mailed to you.
- Payments can be mailed to the Charlotte or Raleigh IRP offices, and credentials will be mailed to you or visit the Charlotte or Raleigh IRP offices, pay and leave with your credentials.



NORTH CAROLINA APPORTIONED LICENSE CAB CARD

DATE REGISTERED: 10/27/2022 EXPIRES: 03/31/2023

1st REG: SAMPLE CAB CARD

2nd REG:

RLTNSHP:

ADDRESS: 123

CITY: RALEIGH

STATE: NC ZIPCODE: 27601

TAX COUNTY: WAKE

Motor Carrier Responsible for safety

USDOT: 12345678

TEST

123

RALEIGH NC 27601

ACCT NO: NC 6646

FLEET /SUP NO: 1 /3



00000282

THIS OFFICIAL NORTH CAROLINA REGISTRATION MUST BE CARRIED IN THE VEHICLE DESCRIBED HEREIN

Plate	Type/ Class	Equipment No	Unladen Weight	NC License Weight	Axles	Seats	Special Vehicle code
	PVT/A	100	12000	80000	3		
Year	Make	Body Style	Fuel Type	Title/Cntl No.	Vehicle Identification No.		
2022	PTRB	TR	D		TEST		

Title/Owners:
SAMPLE CAB CARD

INSURANCE COMPANY: ALLSTATE PROPERTY AND CASUALTY INS CO

INSURANCE POLICY NUMBER: D0FS0D0D0DD

The vehicle described herein has been proportionally registered with North Carolina and other jurisdictions listed below:

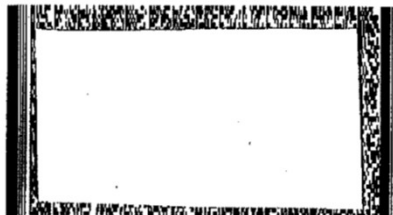
JUR	WEIGHT	JUR	WEIGHT	JUR	WEIGHT	JUR	WEIGHT	JUR	WEIGHT	JUR	WEIGHT
AL	80000	ID	80000	MO	80000	OK	80000	WA	80000	PE	36281
AR	80000	IL	80000	MS	80000	OR	80000	WI	80000	QC	AXL 5
AZ	80000	IN	80000	MT	80000	PA	80000	WV	80000	SK	36281
CA	80000	KS	80000	ND	80000	RI	80000	WY	80000	***	*****
CO	80000	KY	80000	NE	80000	SC	80000	AB	36281		
CT	80000	LA	80000	NH	80000	SD	80000	BC	36281		
DC	80000	MA	80000	NJ	80000	TN	80000	MB	36281		
DE	80000	MD	80000	NM	80000	TX	80000	NB	36281		
FL	80000	ME	80000	NV	80000	UT	80000	NL	36281		
GA	80000	MI	80000	NY	80000	VA	80000	NS	36281		
IA	80000	MN	80000	OH	80000	VT	80000	ON	36281		

NO JURISDICTIONS ARE TO BE LISTED AFTER THE ROW OF ASTERISKS OR CARD IS INVALID. COPIES OF THIS LICENSE CAB CARD ARE NOT VALID.

You must apply for a duplicate apportioned registration. The fee is \$ 21.50

This Apportioned cab card:

- * MUST BE CARRIED IN VEHICLE AT ALL TIMES
- * MUST BE SURRENDERED ALONG WITH CORRESPONDING APPORTIONED LICENSE PLATE IF VEHICLE IS DELETED FROM FLEET





YOU MUST TURN IN LICENSE PLATE AND CAB CARD IF YOU ELECT NOT TO RENEW

- IF YOU ELECT NOT TO RENEW A LICENSE PLATE WHEN PROCESSING YOUR APPORTIONED RENEWAL, YOU MUST TURN IN LICENSE PLATE AND CAB CARD BEFORE YOUR EXPIRATION DATE TO YOUR LOCAL LICENSE PLATE AGENCY. MAKE SURE YOU ARE GIVEN A RECEIPT; THIS SERVES AS PROOF VEHICLE HAS NOT BEEN OPERATED AFTER EXPIRATION. IF YOU TURN IN YOUR LICENSE PLATE AND DECIDE TO ADD THE VEHICLE BACK TO YOUR FLEET, LICENSE FEES WILL BE PRORATED, AND NO LATE FEE WILL BE ACCRUED.
- IF YOU DO NOT TURN IN YOUR LICENSE PLATE BEFORE THE EXPIRATION DATE, YOU WILL BE CHARGED THE FULL REGISTRATION FEE AND LATE FEE WILL BE CHARGED.
- YOU CAN TURN IN AN APPORTIONED LICENSE PLATE AT ANY DMV OFFICE.
 - MUST TURN IN THE LICENSE PLATE, THE STICKERS AND THE APPORTIONED CAB CARD.

Inability to Surrender Apportioned Cab Card

Registered Owner _____
(Print or type)

Street _____

Post Office _____

Make	Serial No.	License No.
------	------------	-------------

I, the undersigned, do hereby certify that the herein identified Apportioned Cab Card, which was issued to me for the vehicle described has been

☐ Lost ☐ Stolen ☐ Destroyed

☐ State other _____

I agree to immediately surrender the Apportioned Cab Card to the Division of Motor Vehicles should it be recovered by me.

Signature of Registered Owner



Methods of Payment

Charlotte and Raleigh IRP Offices

- Check
- Credit/Debit Card
- Money Order



IRP TRANSACTIONS





IRP transactions that must be processed at the Raleigh or Charlotte IRP Offices

- New Account
- Renewals
- Name change –
 - Before name change can be processed all required documentation must reflect the correct name (USDOT Number, MC Number, NC Secretary of State, Lease Agreement, Form E, etc.).
 - Must have titles for all vehicles in fleet.
- Fleet to Fleet
- Fleet Type/Commodity Class Change
- Change who leased to (need new lease agreement and insurance card)



IRP TRANSACTIONS THAT CAN BE PROCESSED AT ONE OF THE 41 LICENSE PLATE AGENCIES ACROSS THE STATE (Branch Office List Enclosed)

- Add Equipment
- Weight Group Change
- Change Insurance(unable to change insurance for leased carrier)
- Turn in License Plate (must turn in license plate, sticker and cab card or complete Inability to Surrender Apportioned Cab Card form)
- Duplicate Cab Card
- Amend Equipment (Correct Vehicle Information)
- Replace Plate
- Replace Sticker
- Lien Recording
- Duplicate Title
- Duplicate Title with Lien Recording
- Pay out IRP online renewal(renewal must be processed online by customer)



FOR-HIRE/IRP BRANCHES

LOCATION	BRANCH NUMBER	LOCATION	BRANCH NUMBER
ALLIANCE	51	MORGANTON	35
ASHEBORO	2	NEW BERN	37
ASHEVILLE	42	N. WILKESBORO	38
ASHEVILLE	56	REIDSVILLE	95
BURLINGTON	8	ROCKY MOUNT	44
CHEROKEE COUNTY	39	RURAL HALL	102
ELIZABETH CITY	14	SALISBURY	46
GOLDSBORO	18	SHELBY	48
GREENSBORO	134	SMITHFIELD	83
GREENSBORO	185	SPINDALE	180
HALIFAX COUNTY	70	SPRING HOPE	89
HENDERSON	21	STATESVILLE	50
HENDERSONVILLE	22	THOMASVILLE	108
HERTFORD	93	WALNUT COVE	49
HIGH POINT	165	WAYNESVILLE	161
KINSTON	26	WHITEVILLE	186
MARTIN COUNTY	171	WILMINGTON	88
MAYSVILLE	82	WILSON	60
MONROE	34	WINSTON SALEM	61
		YANCEYVILLE	173
HEADQUARTERS BRANCHES			
FOR-HIRE/IRP	BRANCH #	FOR-HIRE/IRP	BRANCH #
RALEIGH	931	CHARLOTTE	930



Unified Carrier Registration (UCR)



The Unified Carrier Registration (UCR) Program is a federal law that requires individuals and companies that operate commercial motor vehicles in interstate commerce to register their business with the Unified Carrier Registration System. You pay an annual fee based on the size of your fleet. The UCR applies to all states in the continental US. If a Canadian carrier travels in the lower 48 states, UCR is required.



- The UCR fees are based on the number of commercial motor vehicles you reported on your last MCS-150 form or the total number of commercial motor vehicles owned and operated for the 12-month period ending June 30 of the year immediately prior to the year for which the UCR registration is made.
- A “commercial motor vehicle” for the purposes of UCR is defined as a self-propelled or towed vehicle used on the highways in commerce principally to transport passengers or cargo, if the vehicle:
 - -Has a gross vehicle weight rating or gross vehicle weight of at least 10,001 pounds or more, whichever is greater, or
 - -Is designed to transport 11 or more passengers (including the driver): or
 - -Is used in transporting hazardous materials in a quantity requiring placarding.

Your UCR can be paid on-line at www.ucr.gov.



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UCR payments can no longer be collected at the Charlotte or Raleigh IRP offices.

UCR fees must be paid by January 1st of each year to avoid receiving a citation.



The IRP website is:

www.ncdot.gov/dmv/programs/commercial-trucking



Raleigh IRP Office
919-615-6700

Charlotte IRP Office
980-260-2650

? *QUESTIONS* ?