ITD 3549 (Rev. 09-10) itd.idaho.gov

## **IRP Refund Request**

Idaho Transportation Department



## **Fee Information and Definitions**

Idaho IRP registration fees are determined by using a five-tier schedule. Fees are based on the average number of miles traveled for all jurisdictions by all vehicles listed on the original or renewal registration for each fleet.

On fleets not based in Idaho, the fleet's base jurisdiction uses Idaho's highest registration fee at the time of registration. If a fleet's average miles per vehicle, for all jurisdictions, is <u>50,000 miles or less</u>, you may be entitled to a partial refund of the amount paid to your base jurisdiction for Idaho's registration fee. **Vehicles registered below 62,000 GVW are not charged tiered rates, therefore are not entitled to a refund.** 

The following definitions relate to the numbered fields in the form below:

- 1. Base Jurisdiction Account No. This is the number your base state or province (jurisdiction) has assigned to you.
- 2. Idaho Account No. The account number assigned by Idaho to the Base Jurisdiction Account.
- 3. Number of Vehicles in Fleet The total number of vehicles on the original registration application.
- 4. Total Fleet Miles The total miles for all jurisdictions and vehicles on your original registration application.
- 5. Average Miles per Vehicle Divide the total fleet miles by the number of vehicles in the fleet to determine the average miles per vehicle. If the per-vehicle average is **over 50,000 miles**, **the account is** <u>not </u>**entitled to a refund of registration fees.**

## **Carrier Information**

All fields must be completed, the form signed, and all copies listed below included with the form - Refunds will not be processed without the required information.

1. Base Jurisdiction Account No.	isdiction Account No. Base Jurisdiction 2		Account No.	Company Name			
Address			City		Sta	te/Province	Zip/Postal Code
Fleet Number	3. Number of V	ehicles in	Fleet <b>4.</b> To	tal Fleet Miles for All Jurisdic	ctions	5. Average	Miles Per Unit
equestor's Name (Printed)		Requestor's Signature		9	Date		Phone Number
							( )

Include copies of the following: Jurisdiction Invoice

List of fleet vehicles, including their registered gross vehicle weight (GVW)

Copy of Schedule B

Mail request to: Idaho Transportation Department

PO Box 34

Boise ID 83831-0034

<u>or</u>

Fax request to: (208) 334-8580

<u>or</u>

E-mail request to: cvs@itd.idaho.gov

If you have any questions call: (208) 334-8770 - Monday through Friday; 8:00 a.m. to 5:00 p.m. Mountain Time