



Your Safety • Your Mobility
Your Economic Opportunity

Unified Carrier Registration (UCR) – Year 2021

Idaho Transportation Department – Motor Carrier Services

PO Box 34 Boise ID 83707-0034

Phone: 208-334-8611; Fax: 208-334-2006; E-mail: cvs@itd.idaho.gov

This form is not required if filing online at www.ucr.gov

Idaho Account Number

Section 1 – Carrier Information (Must match the current USDOT record exactly)

USDOT Number	MC/MX/FF Number	Classification (check <input checked="" type="checkbox"/> all that apply):		<input type="checkbox"/> Motor Carrier	<input type="checkbox"/> Motor Private Carrier		
				<input type="checkbox"/> Broker*	<input type="checkbox"/> Freight Forwarder*	<input type="checkbox"/> Leasing Company*	
Contact Telephone Number	Fax Number	E-mail Address					
Legal Name		Doing Business As					
Principal Place of Business Street Address		City	State	Zip Code			
Mailing Address		City	State	Zip Code			

Section 2 – Number of Motor Vehicles (Applies only to Motor Carriers & Motor Private Carriers. *Brokers, Freight Forwarders and Leasing Companies skip this section and indicate the \$59 fee in Section 3.). Check one:

- The number of vehicles shown on Line 1 below matches the current USDOT record.
- The number of vehicles shown on Line 1 below were owned and operated for the 12-month period ending June 30, 2020.

Complete Lines 1 – 5:		Line Total
Line 1	Number of straight trucks & tractors:	
Line 2	Number of passenger vehicles designed to carry more than 10 people including driver:	
Line 3	Total of Lines 1 and 2:	
Line 4	Optional for Motor Carriers & Motor Private Carriers Only – Enter the number of vehicles used exclusively in intrastate transportation or are 10,000 pounds or less:	
Line 5	Subtract Line 4 from Line 3 to determine the number of vehicles subject to this UCR filing:	

Section 3 – Fees					
Number of Vehicles	Fee	Number of Vehicles	Fee	Number of Vehicles	Fee
0 – 2	\$59	6 – 20	\$351	101 – 1,000	\$5,835
3 – 5	\$176	21 – 100	\$1,224	1,001 or more	\$56,977

Total Amount Due

\$

Payment may be made by check (U.S. funds) payable to "State of Idaho." MasterCard, VISA, Discover & American Express are also accepted. **Do not send credit card information with the application, we will contact you by telephone when ready for payment.**

Section 4 – Certification

I, the undersigned, under penalty for false statement, certify that the above information is true and correct and that I am authorized to execute and file this document on behalf of the applicant.

Printed Name of Owner or Authorized Representative	Title
Signature	Date