



**Joint Application for Sale and Transfer of Permanent Authority
To Transport Passenger or Household Goods**

Joint application for sale and transfer of _____ by
(Certificate or Permit Number)
the Indiana Department of Revenue (DOR).

Part 1 - Purchaser Information

1. Purchaser's Name (include DBA, if applicable) _____

2. Street Address _____

3. City, State, ZIP Code _____

4. Telephone Number _____ County _____ Email Address _____

5. Principal place of business in Indiana (if different):

_____ (Street Address) (City) (State) (ZIP Code)

_____ (County)

6. Check One: Partnership Corporation Individual Other: _____

7. If purchaser is a partnership, provide the name and address of each member. If purchaser is a corporation, provide the name, title, and address of each principal officer.

Name _____ Title _____ Address _____

Name _____ Title _____ Address _____

Name _____ Title _____ Address _____

8. If purchaser is a corporation, LP or LLC, provide the State and the date of incorporation.

_____ (State) (Date of Incorporation) (Total Number of Shares Outstanding)

Indicate the most recent year an annual report was filed with Office of the Indiana Secretary of State _____

9. List the name of each shareholder and the number of shares held by each.

Name	Number of Shares

10. List all other motor carrier companies which hold Indiana intrastate operating authority in which any shareholder has an interest.

Motor Carrier Company	Certificate or Permit Number

11. If currently operating under an Indiana certificate or permit, provide the number:

Certificate Number _____ Permit Number _____

Part 2: Seller Information

1. Seller's Name (include DBA, if applicable) _____

2. Street Address _____

3. City, State, ZIP Code _____

4. Telephone Number _____ County _____

5. Principal place of business in Indiana (if different):

6. Check One: Partnership Corporation Individual Other: _____

7. If seller is a partnership, provide the name and address of each member. If seller is a corporation, provide the name, title, and address of each principal officer:

Name _____ Title _____ Address _____

Name _____ Title _____ Address _____

Name _____ Title _____ Address _____

8. If seller is a corporation, provide the state and the date of incorporation.

_____ (State) (Date of Incorporation)

Indicate the most recent year an annual report was filed with Office of the Indiana Secretary of State: _____

9. List all Indiana intrastate authority certificate or permit numbers which the seller will be retaining. (Attach Copies)

10. Is the seller currently in bankruptcy? Yes No

If yes, indicate cause number, date of filing and in what court filed: _____

11. Has any shareholder, partner or owner of seller ever been a shareholder, partner or owner of a motor carrier that has filed bankruptcy? Yes No If yes, complete the following:

Name of Shareholder, Partner or Owner	Motor Carrier	Date of Bankruptcy Petition	Cause Number of Bankruptcy Petition	Court Filed

Did this motor carrier hold intrastate operating authority? Yes No If yes, what happened to the certificate or permit as a result of the bankruptcy? _____

12. Has the seller performed continuous and adequate service under the certificate or permit now pending sale and transfer? _____

In support of this application, the purchaser submits the following exhibits, attached hereto and made part hereof:

- Exhibit A - A statement describing purchaser's financial status, including a brief statement of assets and liabilities as of the date of application, and a copy of applicant's most recent balance sheet and income statement.
- Exhibit B - A certificate from the Office of the Secretary of State of Indiana showing purchaser is registered to do business in Indiana (if the purchaser is a non-resident corporation); or
A certificate of existence from the Secretary of State of Indiana (if the purchaser is an Indiana corporation).
- Exhibit C - A copy of the certificate or permit being transferred including the scope of authority granted by DOR.
- Exhibit D - If seller is currently in bankruptcy, a copy of the bankruptcy petition.

WHEREFORE, the joint applicants ask that the Indiana Department of Revenue approve the sale and transfer of

_____ number _____ and issue a _____ to the purchaser
(Certificate or Permit) (Certificate or Permit)

authorizing the operation of commercial motor vehicles as a _____ carrier over the public highways of the
(Common or Contract)

State of Indiana upon the route and between the points and serving the cities and towns as authorized by the above

numbered _____
(Certificate or Permit)

(Signature of Attorney or Representative or Purchaser)

(Signature of Purchaser)

(Print Name of Attorney or Representative)

(Print Name of Purchaser)

(Address)

(Telephone Number)

STATE OF _____)

) **SS:**

COUNTY OF _____)

Before me the undersigned, a Notary Public for _____ County, State of _____, personally
appeared _____, and they being first duly sworn by me upon their oath, says that the facts alleged in the
foregoing instrument are true. Signed and sealed this _____ day of _____, 20 _____.

(Signature) Notary Public

(Printed Name)

County of Residence: _____ My Commission Expires: _____

(Signature of Attorney)

(Signature of Seller)

(Print Name of Attorney)

(Print Name of Seller)

(Address)

(Telephone Number)

(Email Address)

STATE OF _____)

) **SS:**

COUNTY OF _____)

Before me the undersigned, a Notary Public for _____ County, State of _____, personally
appeared _____, and they being first duly sworn by me upon their oath, says that the facts alleged in the
foregoing instrument are true. Signed and sealed this _____ day of _____, 20 _____.

(Signature) Notary Public

(Printed Name)

County of Residence: _____ My Commission Expires: _____

Instructions for Joint Application of Sale and Transfer of Certificate or Permit

Please read these instructions carefully before completing the application.

The application for sale and transfer of a certificate or permit **must** be typewritten or legible. The original and one copy of the application must be filed.

Each line of the application must be completed. If a line is not applicable, enter "N/A" in the space provided.

For DOR to process the application, you **must** include the following:

- A filing fee of \$100; make checks payable to the Indiana Department of Revenue;
- A publication fee of \$80.

All incomplete applications for passenger and household goods will be returned. If there are any issues once we receive the complete application, we will return the application for corrections. Once corrections have been made, return the entire completed and corrected application. You must schedule an appointment if you would like to visit our walk-in customer service center to set up your account.

IC 8-2.1-22-13 requires DOR to hold a public hearing covering the information below before issuing a certificate or permit.

- The financial ability to furnish adequate service;
- Whether existing transportation service is adequate;
- The effect upon existing transportation, particularly, whether the granting of such application will or may
- Seriously impair such existing service;
- The volume of existing traffic over the proposed route;
- The effect and burden upon the highways and the bridges thereon, and the use thereof by the public; and
- Whether operations will threaten public safety or be detrimental to the public welfare.

If no protests are filed to your application, the hearing will be summary in nature pursuant to 45 IAC 16-1.5-12(c).

Any person may appear and represent his or her own interest. If a person or entity is represented by an attorney, that attorney must be authorized to practice before the Indiana Department of Revenue.

If you have any questions regarding this application, please contact Motor Carrier Services at 317-615-7200, Monday through Friday, 8 a.m. – 4:30 p.m. EST.

Indiana Department of Revenue
Motor Carrier Services / Insurance and Safety
7811 Milhouse Road, Suite M
Indianapolis, Indiana 46241-9612