

Indiana Department of Revenue Joint Application for Sale and Transfer of Permanent Authority to Transport Passenger or Household Goods

Joint application for sale and transfer ofCertificate or Permit Number				by the Indiana Department of Revenue (DOR).			
Par	t 1 – Purchaser Information						
1.	Purchaser's Name (include DB	A, if applicable):					
2.	Street Address						
	City, State, ZIP Code						
4.	Telephone Number		County	/			
	Email Address						
5.	Principal Place of Business in I	ndiana (if different):					
	Street Address						
	City, State, ZIP Code						
	County						
6.	Type of Entity (select one):	Partnership (list members l	elow)	Corporation (list principal officers below)			
		Individual		Other:			
7.	If purchaser is a partnership, p If purchaser is a corporation, p						
	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:	
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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	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):					
Street Address						
City, State, ZIP Code						
County		-				
6. Type of Entity (select one):	Partnership (list members belov	/) Corporation (list principal officers below)				
	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

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, provide the following information.

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	lt d	of the b	ank	cruptcy?

12. Has the seller performed continuous and adequate service under the certificate or permit now pending sale and transfer? Yes No

In support of this application, applicant 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 Dep	artment of Revenue approve the sale and transfer of				
number	and issue a to the purchaser				
authorizing the operation of commercial motor vehicles as a	carrier over the public highways o				
the State of Indiana upon the route and between the points a	and serving the cities and towns as authorized by the above				
numbered					
Signature of Purchaser	Printed Name of Purchaser				
Signature of Attorney or Representative of Purchaser	Printed Name of Attorney or Representative				
Address	Telephone Number				
STATE OF) COUNTY OF) SS:					
	County, State of, personal				
	luly sworn by me upon their oath, says that the facts alleged				
the foregoing instrument are true. Signed and sealed this	day of, 20				
Signature of Notary Public	Printed Name of Notary Public				
County of Residence	Date Commission Expires				
Signature of Seller	Printed Name of Seller				
Signature of Attorney or Representative of Seller	Printed Name of Attorney or Representative				
Address	Telephone Number				
Email Address					
STATE OF)					
STATE OF) SS: COUNTY OF)					
Before me the undersigned, a Notary Public for	County, State of, personal				
appeared, and they being first d	luly sworn by me upon their oath, says that the facts alleged				
the foregoing instrument are true. Signed and sealed this	day of, 20				
Signature of Notary Public	Printed Name of Notary Public				
County of Residence	Date Commission Expires				

Instructions for Joint Application for Sale and Transfer of Permanent Authority

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.

Once DOR has approved the application, you must submit the following payment:

- 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