



BMV Fees

APPLICATION FOR FLEET OWNER TRANSPORTER REGISTRATION PLATE

(The space above is for Department use only)
Bureau of Motor Vehicles • P.O. Box 68289 • Harrisburg, PA 17106-8289

SEE INSTRUCTIONS ON REVERSE SIDE

NOTE: Transporter registration plates can be used only on unladen vehicles.

A LIST INFORMATION AS SHOWN ON YOUR PENNSYLVANIA FLEET ACCOUNT

Carrier Name	Fleet Account Number	Fleet Number
Street Address		
City	State	Zip Code

B INSURANCE INFORMATION

Insurance Company Name		
Policy Number	Policy Effective Date	Policy Expiration Date

C REGISTRATION INFORMATION

Unladen Weight Being Requested	Registration Fee	Number of Registration Plates Being Requested	Fee Required
_____ lbs.	_____	X _____	= _____
_____ lbs.	_____	X _____	= _____
_____ lbs.	_____	X _____	= _____
_____ lbs.	_____	X _____	= _____
_____ lbs.	_____	X _____	= _____
_____ lbs.	_____	X _____	= _____
Total Registration Fee Required			\$ <input style="width: 100px;" type="text"/>

D APPLICANT SIGNATURE

I hereby certify that the requested registration plates will only be used on vehicles titled/leased in the name of my fleet account. I further certify that I acknowledge that I may lose my operating privilege or vehicle registration for failure to maintain financial responsibility on the vehicle for which the transporter registration plate was used for the period of registration.

Signature of Authorized Signer

Date

Title of Authorized Signer

Telephone

INSTRUCTIONS

This form may require a fee. Please review the instructions below carefully prior to submitting the application. For a complete listing of motor vehicle fees, refer to [Form MV-70S, "Bureau of Motor Vehicles Schedule of Fees,"](#) found on our website at www.dmv.pa.gov or scan the QR code on the front of this application. **Payment is to be made by check or money order payable to the Commonwealth of Pennsylvania. DO NOT SEND CASH.**

- List the carrier name as shown on your PA fleet account and your PA fleet account number. List the fleet number to which all the registration plates on this application are to be added. Complete a separate Form MV-615, "Application for Fleet Owner Transporter Registration Plate," for each different fleet. (PennDOT will add these registration plates to the requested fleet by using the fleet transporter registration plate number as the equipment number.) List the complete street address, city, state and zip code where the fleet owner maintains the records for the fleet owner transporter registration plate(s).
- List the insurance company name, policy number, policy effective date and policy expiration date covering the vehicle(s) on which the transporter registration plate(s) will be placed.
- List the maximum unladen gross weight being requested in pounds. List the registration fee for this weight. (For a complete listing of registration fees, refer to [Form MV-70S, "Bureau of Motor Vehicles Schedule of Fees,"](#) found on our website at www.dmv.pa.gov.) List the number of registration plates being requested for this weight. Multiply the fee by the number of registration plates requested. List the total fees due for each different weight requested. Total the fee required column. List the grand total registration fee required.
- Make your check or money order payable to the "Commonwealth of Pennsylvania" and return along with your completed application to: Bureau of Motor Vehicles, P.O. Box 68289, Harrisburg, PA 17106-8289.
- Fleet Owner Transporter registration plates may be personalized. Should you choose to personalize your Fleet Owner Transporter registration plate, please complete and attach [Form MV-904C, "Application for Personalized Commercial Registration Plate,"](#) to this application. **NOTE:** There is an additional \$128 fee required with each personalization request.

Visit us at www.dmv.pa.gov or call us at 717-412-5300. TTY callers — please dial 711 to reach us.