



**INTERNATIONAL REGISTRATON PLAN (FRP)
IRP (2) – VEHICLE INFORMATION**

PLEASE PRINT OR TYPE

(1) Client ID	Fleet	YY	Supp	(2) Registrant name
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Vehicle Transaction Type Code (TRANS CD)			
AV – Add Vehicle	AR – Add Vehicle using Credit		
DV – Delete Vehicle	DR – Delete Vehicle using Credit		

Vehicle Types (VEH TYPE)			
TK – Truck	TT – Truck Tractor	BS - Bus	

Fuel Type	
D - Diesel	P - Propane
G – Gasoline	O - Other

Vehicles listed on this page will be authorized to operate in all jurisdictions at the weights listed below. Use additional page(s) for any vehicle with a weight difference in any jurisdiction.

NOTE: If weight varies 10% in jurisdictions, please explain:

CANADA	(KGS)	U.S.	(LBS)
BC		MD	
AB		ME	
SK		MI	
MB		MN	
ON		MO	
QC (axles)		MS	
NB		MT	
NS		NC	
PE		ND	
NL		NE	
YT		NH	
NT		NJ	
U.S.	(LBS)	NM	
AK		NV	
AL		NY	
AR		OH	
AZ		OK	
CA		OR	
CO		PA	
CT		RI	
DC		SC	
DE		SD	
FL		TN	
GA		TX	
IA		UT	
ID		VA	
IL		VT	
IN		WA	
KS		WI	
KY		WV	
LA		WY	
MA			

1	TRANS CD	UNIT No.	PLATE#	PROV	NEW PLATE#	Year	Make	Model	Colour	CYL	FUEL	VEH TYPE	VEHICLE IDENTIFICATION NUMBER											
	BUS SEATS	WHEEL BASE (m)	TARE (kg)	AXLES	INSURANCE POLICY NUMBER				INSURER'S NAME				EXPIRY DATE											
LESSOR/NAME						LESSOR ADDRESS																		
BROKER NAME						BROKER ADDRESS																		
MONTHLY LEASE AMOUNT \$		LEASE START DATE			LEASE END DATE			OWNED VEH. – DATE OF PURCHASE				PURCHASE PRICE \$				TRADE-IN VALUE \$								

2	TRANS CD	UNIT No.	PLATE#	PROV	NEW PLATE#	Year	Make	Model	Colour	CYL	FUEL	VEH TYPE	VEHICLE IDENTIFICATION NUMBER											
	BUS SEATS	WHEEL BASE (m)	TARE (kg)	AXLES	INSURANCE POLICY NUMBER				INSURER'S NAME				EXPIRY DATE											
LESSOR/NAME						LESSOR ADDRESS																		
BROKER NAME						BROKER ADDRESS																		
MONTHLY LEASE AMOUNT \$		LEASE START DATE			LEASE END DATE			OWNED VEH. – DATE OF PURCHASE				PURCHASE PRICE \$				TRADE-IN VALUE \$								

3	TRANS CD	UNIT No.	PLATE#	PROV	NEW PLATE#	Year	Make	Model	Colour	CYL	FUEL	VEH TYPE	VEHICLE IDENTIFICATION NUMBER											
	BUS SEATS	WHEEL BASE (m)	TARE (kg)	AXLES	INSURANCE POLICY NUMBER				INSURER'S NAME				EXPIRY DATE											
LESSOR/NAME						LESSOR ADDRESS																		
BROKER NAME						BROKER ADDRESS																		
MONTHLY LEASE AMOUNT \$		LEASE START DATE			LEASE END DATE			OWNED VEH. – DATE OF PURCHASE				PURCHASE PRICE \$				TRADE-IN VALUE \$								

4	TRANS CD	UNIT No.	PLATE#	PROV	NEW PLATE#	Year	Make	Model	Colour	CYL	FUEL	VEH TYPE	VEHICLE IDENTIFICATION NUMBER											
	BUS SEATS	WHEEL BASE (m)	TARE (kg)	AXLES	INSURANCE POLICY NUMBER				INSURER'S NAME				EXPIRY DATE											
LESSOR/NAME						LESSOR ADDRESS																		
BROKER NAME						BROKER ADDRESS																		
MONTHLY LEASE AMOUNT \$		LEASE START DATE			LEASE END DATE			OWNED VEH. – DATE OF PURCHASE				PURCHASE PRICE \$				TRADE-IN VALUE \$								

SIGNATURE OF APPLICANT

APPLICANT NAME (PLEASE PRINT)
MAIL TO: IRP Office, PO Box 1998, Fredericton NB E3B 5H4 or fax to: (506)453-3076

DATE

INSTRUCTIONS

The following instructions are intended to provide general directions on completion of your application. Please review carefully prior to submitting your forms. Print or type all information entered on the application form. If you have any questions contact the IRP office in your area. Further information is provided in the IRP Carrier Manual. Completed forms may be faxed to begin the application process; however original signed copies of the form must be submitted to IRP office.

1. CARRIER ACCOUNT INFORMATION

Client ID No.	The seven (7) digit account number assigned to you by the IRP office. If you are a new carrier, leave this space blank.
Fleet	The two (2) digit Fleet number.
Fleet Year	The last two (2) digits of the year in which the fleet expires. For example if your fleet expires March 31, 2010 the year is 10.
Supp	The three (3) digit supplement number for the application. A first transaction or fleet renewal in IRP is supplement 00. If you do not know the supplement number, leave this space blank.

2. REGISTRANT NAME

Enter the name of the Carrier, person, Company or corporation in which the fleet is to be registered.

3. WEIGHT VARIANCES

IPR limits the registered weight to not vary by more than 10% between the highest and lowest weights requested for jurisdictions. If the weight varies more than 10% within Canada or 10% within US, you must provide a detailed explanation in the space provided.

4. VEHICLE WEIGHTS

List Canadian jurisdiction weights in Kilograms (for Quebec the number of axles) and US weight in pounds. Weights must be entered for all jurisdictions.

5.VECHICLE INFORMATION TRANS CD

AV	Add Vehicle	New fleet, renew fleet and add vehicle to fleet	UNIT NUMBER	Carrier Assigned Unit Number for vehicle within fleet	CURRENT PLATE #	Plate number currently on vehicle
DV	Delete Vehicle	Delete vehicle without replacement in same supplement				
AR	Add Vehicle (credit)	Add vehicle using credit from deleted vehicle in same supplement				
DR	Delete vehicle (credit)	Delete vehicle using credit on fees for another vehicle within same supplement				

PROV	2 Digit Provincial code in which vehicle is registered.		NEW PLATE #	Leave Blank For Office Use Only	YEAR	Year of Vehicle
MAKE	Up to first six (6) digits of make		MODEL	Up to first six(6) digits of model of vehicle	COLOUR	Primary COLOUR of vehicle
CYL	Number of cylinders		FUEL	Fuel type as listed by code on vehicle information form	VEH TYPE	The type of vehicle as per vehicle types listed on form.
VEHICLE IDENTIFICATION NUMBER (VIN)	<u>Complete</u> VIN (serial number) of vehicle being registered.		BUS SEATS/ WHEEL BASE	Maximum number of passengers that can be transported / wheel base in meters.	TARE WEIGHT	Empty weight of power unit.
AXLES	Number of axles on power unit		INSURANCE POLICY NUMBER	Policy number issued by insurance company	INSURER'S NAME	Name of Insurance Company
EXPIRY DATE	Expiry date of insurance policy in DD/MM/YYYY format		LESSOR/BROKER NAME AND ADDRESS	Complete name and address of lessor or broker	MONTHLY LEASE AMT	Lease amount per month in Canadian funds
LEASE START/END DATE	Starting and Ending dates of lead in DD/MM/YYYY format		OWNED VEHICLE DATE OF PURCHASE	Date vehicle purchased in DD/MM/YYYY format	OWNED VEHICLE PURCHASE PRICE	Purchase price of vehicle in Canadian funds, including accessories, service and finance charges
TRADE IN VALUE	Value of Trade in on previous vehicle in Canadian \$					

6. SIGNATURE Signed and dated by contact person

NOTE: The Issuance of a Registration Document Is Not a Wavier of the Requirements for Any IRP Jurisdiction with Respect to Obtaining Operating Authority, Fuel Permits, Numbers or Financial Responsibility