

30. WHICH OF THE FOLLOWING HAZARDOUS MATERIAL(S) DOES YOUR COMPANY TRANSPORT, CHECK ALL THAT APPLY:

- Highway Route Controlled Quantities (HRCQ) of Radioactive materials.
- More than 25 kg (55 pounds) of a Division 1.1, 1.2, or 1.3 material or a quantity of Division 1.5 material that requires placarding
- For materials that meet the definition of "material poisonous by inhalation" (TIH) as defined in 49 CFR 171.8: More than 1 liter (1.08 quarts) per package of a material meeting the definition of a Hazard Zone A TIH material, a material meeting the definition of a Hazard Zone B TIH material in a bulk package (capacity greater than 450 liters [119 gallons]), or a material meeting the definition of a Hazard Zone C or D TIH material in a bulk packaging that has a capacity greater than 13,248 L (3,500 gallons).
- Shipments of compressed or refrigerated liquid methane or liquefied natural gas with a methane content of at least 85% in a bulk packaging that has a capacity greater than 13,248 L (3,500 gallons)

31. IF YOU CHECK QUESTION 30, ARE YOU APPLYING FOR OR RENEWING A HM SAFETY PERMIT? PLEASE CHECK ONE:

INITIAL

RENEWAL

32. IF YOUR COMPANY DOES NOT HAVE A U.S. DOT NUMBER, HOW MANY ACCIDENTS AS DEFINED IN 49 CFR 390.5 HAS YOUR COMPANY HAD IN THE PAST 365 DAYS?

33. DOES YOUR COMPANY CERTIFY THEY HAVE A SATISFACTORY SECURITY PROGRAM IN PLACE AS REQUIRED IN 49 CFR PART 385, SUBPART E?

Yes

No

34. IS YOUR COMPANY REQUIRED BY ANY STATE(S) TO HAVE A PERMIT FOR ANY OF THE HAZARDOUS MATERIALS LISTED IN QUESTION 30?

Yes

No

35. IF YOUR ANSWER TO QUESTION 34 IS YES, CHECK THE STATE(S) IN WHICH YOU HAVE THE PERMIT.

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| <input type="checkbox"/> AL | <input type="checkbox"/> AK | <input type="checkbox"/> AR | <input type="checkbox"/> AZ | <input type="checkbox"/> CA | <input type="checkbox"/> CO | <input type="checkbox"/> CT | <input type="checkbox"/> DC | <input type="checkbox"/> DE | <input type="checkbox"/> FL | <input type="checkbox"/> GA |
| <input type="checkbox"/> HI | <input type="checkbox"/> ID | <input type="checkbox"/> IL | <input type="checkbox"/> IN | <input type="checkbox"/> IA | <input type="checkbox"/> KS | <input type="checkbox"/> KY | <input type="checkbox"/> LA | <input type="checkbox"/> MA | <input type="checkbox"/> MD | <input type="checkbox"/> ME |
| <input type="checkbox"/> MI | <input type="checkbox"/> MN | <input type="checkbox"/> MO | <input type="checkbox"/> MS | <input type="checkbox"/> MT | <input type="checkbox"/> NC | <input type="checkbox"/> ND | <input type="checkbox"/> NE | <input type="checkbox"/> NH | <input type="checkbox"/> NJ | <input type="checkbox"/> NM |
| <input type="checkbox"/> NV | <input type="checkbox"/> NY | <input type="checkbox"/> OH | <input type="checkbox"/> OK | <input type="checkbox"/> OR | <input type="checkbox"/> PA | <input type="checkbox"/> PR | <input type="checkbox"/> RI | <input type="checkbox"/> SC | <input type="checkbox"/> SD | <input type="checkbox"/> TN |
| <input type="checkbox"/> TX | <input type="checkbox"/> UT | <input type="checkbox"/> VT | <input type="checkbox"/> VA | <input type="checkbox"/> WA | <input type="checkbox"/> WV | <input type="checkbox"/> WI | <input type="checkbox"/> WY | | | |

NOTE:

All motor carriers must comply with all pertinent Federal, State, local and tribal statutory and regulatory requirements when operating within the United States. Such requirements include, but are not limited to, all applicable statutory and regulatory requirements administered by the U.S. Department of Labor, or by a State agency operating a plan pursuant to Section 18 of the Occupational Safety and Health Act of 1970 ("OSHA State plan agency"). Such requirements also include all applicable statutory and regulatory environmental standards and requirements administered by the U.S. Environmental Protection Agency or a State, local or tribal environmental protection agency. Compliance with these statutory and regulatory requirements may require motor carriers and/or individual operators to produce documents for review and inspection for the purpose of determining compliance with such statutes and regulations.

36. CERTIFICATION STATEMENT (TO BE COMPLETED BY AN AUTHORIZED OFFICIAL)

I, _____, certify that I am familiar with the Federal Motor Carrier Safety Regulations and/or the Federal Hazardous Materials Regulations. Under penalties of perjury, I declare that the information entered on this report is, to the best of my knowledge and belief, true, correct, and complete.

(Please print Name)

Signature _____ Date _____ Title _____

NOTICE

This collection of information is mandatory and is required by 49 CFR Part 385 and authorized by 49 U.S.C. 504 (1982& Supp. III 1985). The Form MCS-150, Motor Carrier Identification Report, must be filed by all motor carriers operating in interstate or foreign commerce. A new motor carrier must file Form MCS-150 before beginning operations. The Form MCS-150B, combined Motor Carrier Identification Report and HM Safety Permit Application, must be filed by all motor carriers operating in interstate or foreign commerce that carry hazardous materials requiring an HM Safety Permit. This form takes the place of the MCS-150 for carriers required to have an HM Safety Permit. If you are a hazardous materials shipper, but not a motor carrier, you are not required to file this report. This information will be used to identify motor carriers subject to the Federal Motor Carrier Safety and Hazardous Materials regulations. Carriers may voluntarily update information using this report.

Public reporting for this collection of information is estimated to be 26 minutes per response, including the time for reviewing instructions and completing and reviewing the collection of information. All responses to this collection of information are voluntary, and will be provided confidentiality to the extent allowed by law. Notwithstanding any other provision of law, no person is required to respond to nor shall a person be subject to a penalty for failure to comply with a collection of information subject to the requirements of the Paperwork Reduction Act unless that collection of information displays a current valid OMB Control Number. The valid OMB Control Number for this information collection is 2126-0013. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to: Information Collection Clearance Officer, Federal Motor Carrier Safety Administration, MC-MBI, U.S. Department of Transportation, Washington, D.C. 20590

NOTE:

All responses to this collection of information are mandatory in accordance with (cite law or regulation, etc), and will be provided confidentiality to the extent allowed by law.

To mail, fold the completed report so that the self addressed postage paid panel is on the outside

INSTRUCTIONS FOR COMPLETING THE COMBINED MOTOR CARRIER IDENTIFICATION REPORT AND HM PERMIT APPLICATION

*(Please, **Print** or **Type** All Information)*

Please, check the appropriate box:

New application - To obtain a U.S. DOT Number to operate in interstate commerce.

Biennial Update or changes – To file the required MCS-150 Biennial update or to file other changes to MCS-150 information.

Out of business notification – To notify FMCSA that you are no longer operating as a motor carrier (complete items 1-20).

Reapplication (after revocation of New Entrant) - To reapply after your U.S. DOT number has been revoked (complete items 1-30). Use assigned U.S. DOT number for item number 16.

1. Enter the legal name of the business entity. (i.e., Corporation, partnership, or individual) that owns/controls the motor carrier/shipper operation.
2. If the business entity is operating under a name other than that in Block 1. (i.e., "trade name") enter that name. Otherwise, leave blank.
3. Enter the principal place of business street address where safety records are kept.
4. Enter the city where the principal place of business is located.
5. Enter the mailing address if different from the physical address, otherwise leave blank. Also, applies to #6, #10, #11 & #12.
6. Enter the city corresponding with the mailing address.
7. Enter the two-letter postal abbreviation for the State or the name of the Canadian Province/Territory or Mexican State corresponding with the physical address.
8. Enter the zip code + 4 number corresponding with the physical street address.
9. If a Mexican motor carrier or shipper, enter the Mexican "colonia" or "barrio" where the physical place of business is located.
10. Enter the two-letter postal abbreviation for the State or the name of the Canadian Province/Territory or Mexican State corresponding with the mailing address.
11. Enter the zip code + 4 number corresponding with the mailing street address.
12. If a Mexican motor carrier or shipper, enter the Mexican "colonia" or "barrio" where the physical place of business is located.
13. Enter the telephone number, including area code, of the principal place of business.
14. Enter Cellular phone number, including area code, of the principal place of business.
15. Enter the fax number, including area code, of the principal place of business.
16. Enter the identification number assigned to your motor carrier operation by the U.S. Department of Transportation, if known.
17. Enter the motor carrier "MC" or "MX" number under which the Federal Motor Carrier Safety Administration (FMCSA), or Interstate Commerce Commission (ICC) issued your operating authority, if appropriate.
18. Enter your Dun & Bradstreet business number (used as a secondary identifier; if you do not have one, leave blank).
19. Enter the employer identification number (EIN#) or social security number (SSN#) assigned to your motor carrier operation by the Internal Revenue Service.
20. Enter the e-mail address for the official point of contact, if you have one.
21. Circle the appropriate type of operation classification. You may circle either Registrant, or up to one Carrier and one Shipper Operation.
 - *Interstate (Carrier/Shipper)* – transportation of persons or property across State lines, including international boundaries, or wholly within one State as part of a through movement that originates or terminates in another State or country.
 - *Intrastate (Hazmat Carrier, Non-Hazmat Carrier, Shipper)* - transportation of hazardous property wholly within the boundaries of a single State.
 - *Registrant* – An entity who registers commercial motor vehicle with a State but does not operate as a motor carrier. For example, a company that is engaged solely in renting or leasing vehicles, or for-hire operator that always operated under the authority of another company.
22. Enter the carrier's total mileage to nearest 10,000 miles for the past calendar year, and the year of the mileage.
23. Circle appropriate classification. Circle **ALL** that apply. If "L. Other" is circled; enter the type of operation in the space provided.
 - a. *Authorized for Hire* – transportation for compensation as common or contract carrier of property, owned by others, or passengers under the provision of the FMCSA.

- b. *Exempt For Hire* – transportation for compensation of property or passengers exempt from the economic regulation by the FMCSA.
- c. *Private Property* – means a person who provides transportation of property by commercial motor vehicle and is not a for-hire motor carrier.
- d. *Private Passengers (Business)* – a private motor carrier engaged in the interstate transportation of passengers which is provided in the furtherance of a commercial enterprise and is not available to the public at large (e.g., bands)
- e. *Private Passengers (Non-Business)* – a private motor carrier involved in the interstate transportation of passengers that does not otherwise meet the definition of a private motor carrier of passengers.
- f. *Migrant* – interstate transportation, including a contract carrier, but not a common carrier of 3 or more migrant workers to or from their employment by any motor vehicle other than a passenger automobile or station wagon.
- g. *U.S. Mail* – transportation of U.S. Mail under contract with the U.S. Postal Service.
- h. *Federal Government* – transportation of property or passengers by a U.S. Federal Government agency.
- i. *State Government* – transportation of property or passengers by a U.S. State Government agency.
- j. *Local Government* – transportation of property or passengers by a local municipality.
- k. *Indian Tribe* – transportation of property or passengers by an Indian tribal government.
- l. *Other* – transportation of property or passengers by an operation classification not described above.
24. Circle **all** the letters of the types of cargo you usually transport. If "Other" is circled, enter the name of the commodity in the space provided.
25. Circle all types of hazardous materials (HM) you transport/ship. In the columns before the HM types, circle C for a carrier of HM and S for a shipper of HM. In the columns following the HM types, circle B if the HM is transported in bulk (over 119 gallons) and NB if the HM is transported in non-bulk (119 gallons or less). The HM types correspond to the classes and divisions listed in 49 CFR 173.2. Below are clarifications for the lettered codes:

A.	Div 1.1 Explosives (with mass explosion hazard)	V.	Div 4.3 Dangerous when wet material
B.	Div 1.2 Explosives (with projection hazard)	W.	Div 5.1 Oxidizer
C.	Div 1.3 Explosives (with predominantly fire hazard)	X.	Div 5.2 Organic Peroxide
D.	Div 1.4 Explosives (with no significant blast hazard)	Y.	Div 6.2 Infectious substance (Etiologic agent)
E.	Div 1.5 Very insensitive explosives; blasting agents	Z.	Div 6.1 A (Poison Liquid which is a PIH Zone A)
F.	Div 1.6 Extremely insensitive detonating substances	AA.	Div 6.1 B (Poison Liquid which is a PIH Zone B)
G.	Div 2.1 Flammable gas	BB.	Div 6.1 Poison (Poisonous liquid with no inhalation hazard.
H.	Div 2.1 LPG (Liquified Petroleum Gas)	CC.	Div 6.1 Solid (Meets the definition of a poisonous solid.
I.	Div 2.1 Methane Gas	DD.	Class 7 Radioactive materials.
J.	Div 2.2 Non-flammable compressed gas	EE.	HRCQ (Highway Route Controlled Quantity of Radioactive Material)
K.	Div 2.2 A (Anhydrous Ammonia)	FF.	Class 8 Corrosive material
L.	Div 2.3 A (Poison Gas which is Poison Inhalation Hazard (PIH) Zone A)	GG.	Class 8 A (Corrosive liquid which is a PIH Zone A)
M.	Div 2.3 B (Poison Gas which in PIH Zone B)	HH.	Class 8 B (Corrosive liquid which is a PIH Zone B)
N.	DIV 2.3 C (Poison Gas which is PIH Zone C)	II.	Class 9 Miscellaneous hazardous material
O.	DIV 2.3 D (Poison Gas which is PIH Zone D)	JJ.	Elevated Temperature Material (Meets definition in 49 CFR 171.8 for an elevated temperature material)
P.	Class 3 Flammable and combustible liquid	KK.	Infectious Waste (Meets definition in 49 CFR 171.8 for an infectious waste)
Q.	Class 3 A (Flammable liquid which is a PIH Zone A)	LL.	Marine Pollutants (Meets Definition in 49 CFR 171.8 for a marine pollutant)
R.	Class 3 B (Flammable liquid which is a PIH Zone B)	MM.	Hazardous Sub (RQ) (Meets definition in 49 CFR 171.8 of a reportable quantity of a hazardous substance)
S.	Combustible Liquid (Refer to 49 CFR 173.20 (b))	NN.	Hazardous Waste (Meets definition in 49 CFR 171.8 of a hazardous waste)
T.	Div 4.1 Flammable Solid	OO.	ORM (Meets definition in 49 CFR 171.8 of Other Regulated Material)
U.	Div 4.2 Spontaneously combustible material		

Note: Information on Poison Inhalation Hazards is found in column 7 of the Hazardous Materials table, (49 CFR 172.101).

26. Enter the total number of vehicles owned, term leased and trip leased, that are, or can be, operational the day this form is completed. Passenger vehicles are defined as:
- *Motor coach*—a vehicle designed for long distance transportation of passengers, usually equipped with storage racks above the seats and a baggage hold beneath the passenger compartment.
 - *School Bus*—a vehicle designed and/or equipped mainly to carry primary and secondary students to and from school, usually built on a medium or large truck chassis.
 - *Mini-bus*—a motor vehicle designed or used to transport 16 or more passengers, including the driver, and typically built on a small truck chassis. A mini-bus has a smaller seating capacity than a motor coach.
 - *Van*—a small motor vehicle designed or used to transport 15 or fewer passengers, including the driver.
 - *Limousine*—a passenger vehicle usually built on a lengthened automobile chassis.
27. Enter the number of interstate/intrastate drivers used on an average work day. Part-time, casual, term leased, trip leased and company drivers are to be included. Also, enter the total number of drivers (Interstate/Intrastate) and the total number of drivers who have a Commercial Drivers License (CDL).
- *Interstate*—driver transports people or property across State lines, including international boundaries, or wholly within one State as part of a through movement that originates or terminates in another State or country.
 - *Intrastate*—driver transports people or property wholly within one State.
 - *100-mile radius driver*—driver operates only within a 100 air-mile radius of the normal work reporting location.
28. Enter U.S. DOT Number if your U.S. DOT Number registration revoked by the Federal Motor Carrier Safety Administration (FMCSA).
29. Enter Two (2) names of sole proprietor(s), officers or partners and titles.

30. Check the box or boxes that correspond to materials you transport. If you do not transport any of these materials, you do not need an HM Safety Permit.
31. Mark the "initial" box if you currently do NOT have an HM Safety Permit. If you currently hold an HM Safety Permit, check the "renewal" box.
32. If your company currently does not have a Federal U.S. DOT number, then enter the number of accidents as defined in 49 CFR 390.5 that your company has had in the past 365 days. The definition of "accident" in 49 CFR 390.5 is:
 - (1) Except as provided in paragraph 2 of this definition, an occurrence involving a commercial motor vehicle operating on a highway in interstate or intrastate commerce which results in:
 - (i) A fatality;
 - (ii) Bodily injury to a person who, as a result of the injury, immediately receives medical treatment away from the scene of the accident; or
 - (iii) One or more motor vehicles incurring disabling damage as a result of the accident, requiring the motor vehicle(s) to be transported away from the scene by a tow truck or other motor vehicle.
 - (2) The term accident does not include:
 - (i) An occurrence involving only boarding and alighting from a stationary motor vehicle; or
 - (ii) An occurrence involving only the loading or unloading of cargo."
33. Confirm that your company has a satisfactory security program in place as required in 49 CFR Part 385, subpart E.
34. If your company is required to have a STATE permit to transport any of the materials listed in question 30, answer yes. If you are not required to have a state permit, check no.
35. If you checked "yes" in question 34, then indicate, by checking the box next to the State abbreviation, the States that you have a permit for to transport the materials listed in question 30.
36. Print or type the name, in the space provided, of the individual authorized to sign documents on behalf of the entity listed in Block 1. That individual must sign, date, and show his or her title in the spaces provided (Certification Statement, see 49 CFR 390.19).