



# Application for Transit Permit and Plates

Office Use Only

Title and Registration Bureau

P.O. Box 201431, 302 N Roberts, Helena, MT 59620-1431 Phone (406) 444-3661 Fax (406) 444-0116 • [mvdtitleinfo@mt.gov](mailto:mvdtitleinfo@mt.gov)

Number: \_\_\_\_\_

Initial Fee: \$100.00

\_\_\_\_\_ sets of plates @ \$20.00 per set: \_\_\_\_\_

TOTAL: \_\_\_\_\_

I (print clearly) \_\_\_\_\_ hereby make application for registration as a transporter of new vehicles, trailers, or new or used mobile homes for the year 20\_\_\_\_.

This business will be conducted under the name of:

\_\_\_\_\_ Business Name

\_\_\_\_\_ Business Street Address City State Zip Code

\_\_\_\_\_ Mailing Address (P.O. Box or Street Address) City State Zip Code

\_\_\_\_\_ Phone Number Federal Tax ID or Corporate Tax ID No. E-Mail Address

**Indicate with an X the vehicle type(s) you will be transporting:**

<input type="checkbox"/> <b>New</b> Motor Vehicles (to include cars, trucks, rugged terrain [sport utility], vans, and buses)
<input type="checkbox"/> <b>New</b> Trailers
<input type="checkbox"/> <b>New or Used</b> Mobile Homes

Under penalty of law (MCA 45-7-203), I certify that the statements made and information contained on this form are true and correct to the best of my knowledge, information, and belief; I am the person named on this form; and, if signing for a business entity or trust, I have full authority to do so.

\_\_\_\_\_ Applicant's signature

\_\_\_\_\_ Applicant's printed name

\_\_\_\_\_ Title

\_\_\_\_\_ Date