

## Department of the Secretary of State Bureau of Motor Vehicles Motor

## **Carrier Services**

## Application for Online Carrier User Account

Carrier Information	Requesting access	for (check): _	IFTA _	_ IRP
Carrier Legal Name:				
DBA:				
Carrier Account Number:	US DOT	Γ Number:		
Taxpayer ID Type: 🗌 FEIN	SSN Taxpayer:			
lame of User- (Person loggin	g into Account) Application	n required for each	user to be as	signed
Name of User:		Title:		
Street:				
City:	State:	Zi <sub> </sub>	o:	
Phone Number:		Ext.:		
Fax Number:				
Email Address:				
Would you like email notification print needed forms. (Circle)		ailed? This would re	quire logging	in to
uthorization – Must be signe	ed by an Owner			
I certify that				
	rly authorized representative of the carrier and sign this applic		carrier and ha	ive the
	e is authorized to conduct onl e carrier named above.	line transactions in tl	ne Maine IFT	VIRP
Name:				
Signature	Title		Date	

\*\*IRP offers a training class in our office, call for more info\*\*

Please return completed application to the Bureau of Motor Vehicles, you also need to request access from our web page and create your own user name and password at either www.meifta.com or www.meirp.com