

MV-615
“Application for Fleet Owner Transporter Registration Plate”

Instructions

1. List the carrier name as shown on your PA Fleet Account.
2. List your PA Fleet Account number.
3. List the fleet number to which all the plates on this application are to be added. Complete a separate MV-615 for each different fleet.
4. 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).
5. List the insurance company name, policy number, policy effective date and policy expiration date covering the vehicle(s) on which the Transporter plate(s) will be placed.
6. List the maximum unladen gross vehicle weight being requested in pounds. List the annual registration fee for this weight. (Refer to the chart on page 2 of the form. List the number of plates being requested for this weight. Multiply the annual fee by the number of plates requested. List the total fees due for each different weight requested. Total the fee required column. List the grand total registration fee required.
7. Make your check or money order payable to the “Commonwealth of Pennsylvania” and return along with your completed application to the Bureau of Motor Vehicles, P.O. Box 68289, Harrisburg, PA 17106-8289.

MV-615 (12-00)

Department of Transportation
Bureau of Motor Vehicles
Commercial Registration Section
P.O. Box 68289
Harrisburg, PA 17106-8289

**Application for Fleet
Owner Transporter
Registration Plate**

FOR DEPARTMENT USE ONLY

(See Instructions on Reverse Side)

NOTE: Transporter 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 or Town	State	Zip Code

B Registration Plate Information

Insurance Company Name		
Policy Number	Policy Effective Date	Policy Expiration Date

Unladen Reg. Gross Weight Being Requested	Annual Registration Fee from Chart on Reverse		Number of Plates Being Requested	=	Fee Required
_____ lbs.	_____	X	_____	=	_____
_____ lbs.	_____	X	_____	=	_____
_____ lbs.	_____	X	_____	=	_____
_____ lbs.	_____	X	_____	=	_____
_____ lbs.	_____	X	_____	=	_____
_____ lbs.	_____	X	_____	=	_____

Total Registration Fee Required \$

C 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 plate was used for the period of registration.

X _____ ()
Signature of Authorized Person Date Telephone Number

X _____
Title of Authorized Person

Messenger No.

Instructions

- 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 plates on this application are to be added. Complete a separate Form MV-615 for each different fleet. (The Department will add these 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 plate(s) will be placed.
- List the maximum unladen gross weight being requested in pounds. List the annual registration fee for this weight. (Refer to the chart below for the annual fee for each weight.) List the number of plates being requested for this weight. Multiply the annual fee by the number of plates requested. List the total fees due for each different weight requested. Total the fee required column. List the grand total registration fee required.

TRUCKS AND TRUCK TRACTORS

UNLADEN GROSS WEIGHT	REGULAR TRUCK FEE ANNUAL	REGULAR TRUCK FEE MONTHLY
5,000 or Less	58.50	4.88
5,001 - 7,000	81.00	6.75
7,001 - 9,000	153.00	12.75
9,001 - 11,000	198.00	16.50
11,001 - 14,000	243.00	20.25
14,001 - 17,000	288.00	24.00
17,001 - 21,000	355.50	29.63
21,001 - 26,000	405.00	33.75
26,001 - 30,000	472.00	39.38
30,001 - 33,000	567.00	47.25
33,001 - 36,000	621.00	51.75
36,001 - 40,000	657.00	54.75

TRAILER AND SEMI-TRAILER (No change to Annual Fee)

Gross Weight In Lbs.	Annual Fee	Fee Per Mo.	Opt. 5 Year Fee	Optional Permanent
3,000 lbs. or less	6.00	.50	30.00	N/A
3,001 lbs. to 10,000	12.00	1.00	60.00	N/A
10,001 or more	27.00	2.25	N/A	135.00

Trailers 10,000 lbs. or less may be registered for periods of one year or five years.

	Annual Fee	Fee Per Mo.
Passenger	36.00	3.00

- Make your check or money order payable to the "Commonwealth of Pennsylvania" and return along with your completed application to the Bureau of Motor Vehicles, P.O. Box 68289, Harrisburg, PA 17106-8289.