

# APPLICATION TO CHANGE INFORMATION ON FLEET ACCOUNT OR FLEET VEHICLE



To complete this application, see instructions in PA Fleet Instruction Manual

**DEPARTMENT USE ONLY**

**A.** NAME OF APPLICANT

**B.** ACCOUNT/FLEET #

**ONLY CHECK BLOCK(S) WHICH YOU ARE CHANGING OR CORRECTING AND LIST NEW INFORMATION**

**C.**  **APPLICANT INFORMATION**

<input type="checkbox"/> BUSINESS ADDRESS	STREET OR RD
<input type="checkbox"/> MAILING ADDRESS	CITY STATE ZIP CODE
<input type="checkbox"/> LESSOR NAME/ADDRESS	NAME
<input type="checkbox"/> LESSEE NAME/ADDRESS	STREET OR RD
	CITY STATE ZIP CODE

CONTACT PERSON  PHONE NUMBER

<b>D.</b>	<b>VEHICLE DATA</b>	VIN NUMBER AS IT APPEARS ON PA TITLE	TITLE NUMBER	EQUIPMENT NUMBER
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CHANGE	CORRECTION	E.	EXPLAIN PHYSICAL CHANGE AND/OR CHANGE IN USE OF THE VEHICLE AND/OR REASONS FOR APPLYING FOR CHANGE OR CORRECTION OF VEHICLE DATA.
<input type="checkbox"/>	<input type="checkbox"/>	EQUIPMENT NUMBER	
<input type="checkbox"/>	<input type="checkbox"/>	MAKE OF VEHICLE	
<input type="checkbox"/>	<input type="checkbox"/>	YEAR	
<input type="checkbox"/>	<input type="checkbox"/>	BODY TYPE	
<input type="checkbox"/>	<input type="checkbox"/>	SEATING CAPACITY	
<input type="checkbox"/>	<input type="checkbox"/>	UNLADEN WEIGHT	
<input type="checkbox"/>	<input type="checkbox"/>	REGISTERED GROSS COMBINATION WEIGHT	
<input type="checkbox"/>	<input type="checkbox"/>	REGISTERED GROSS VEHICLE WEIGHT	
<input type="checkbox"/>	<input type="checkbox"/>	NUMBER OF AXLES	WAS ADDITIONAL AXLE INSTALLED? <input type="checkbox"/> YES <input type="checkbox"/> NO GAWR (FOR ADDED AXLES) _____
<input type="checkbox"/>	<input type="checkbox"/>	OTHER	

<b>F.</b>	<b>CORRECT VIN AS VERIFIED</b>	(Note: Notary Public must be employed by a PA authorized dealer or a bonded messenger service) Notary Public must sign and affix seal.
Attach tracing here		SUBSCRIBED AND SWORN TO BEFORE ME: MO. DAY YEAR
Verification by Notary Public or Inspection Mechanic Correct VIN: GVWR:		SIGNATURE OF PERSON ADMINISTERING OATH
Signature of Inspection Mechanic		<b>S E A L</b>  SIGN IN PRESENCE OF NOTARY
Inspection Mechanic Number		

**G. CERTIFICATION**

I (we) hereby certify under penalty of law that all information given on this application is true and correct (date must be listed).

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APPLICANT'S SIGNATURE
TITLE
DATE