APPLICATION FOR IRP REGISTRATION

Office Use Only
IRP Account Number
_____

Delaware Department of Transportation
International Registration Plan
P O Drawer E
Dover, Delaware 19903
(302) 744-2701 / Option #2

Legal Name	
DBA	
FEIN	SSN
USDOT Number	DE Drivers License Number

Ownership Type: ☐ Sole Proprietor ☐ Partnership ☐ Corporation ☐ Limited Liability Corporation
☐ Limited Liability Partnership

President OR Partner _____ Vice President OR Partner_____

Secretary _____ Treasurer_____

Contact

Name/Title _____ Phone _____

Email _____@_____._____

FAX _____ Alt Phone _____
(mobile, home, office, other)

Physical Location (No Post Office Box)

Street _____

City _____ State **DE** Zip _____ County _____

Mailing Address

P O Box _____

Street _____

City _____ State _____ Zip _____

I certify that the information reported above is true and correct to the best of my knowledge

_____ _____
Signature Date