



Application For an Oregon Intrastate Certificate to Transport Household Goods

Before Filing

Household goods are defined as the personal effects or other property used or to be used in a dwelling but do not include property transported from a store or factory.

A motor carrier certificate of authority is required for persons or businesses providing and/or offering to provide for-hire transportation of household goods between points in Oregon.

ODOT Commerce and Compliance Division (CCD) can be reached by email at CCDHouseholdGoods@odot.oregon.gov or by phone at 503-378-5983 and can assist you with determining whether your Oregon transportation activities require a for-hire certificate. However, it is important that you remember you must clearly and accurately describe the service(s) you intend to provide to receive the most accurate information from staff. Small details can impact how Oregon transportation law is applied and enforced. You must also remember CCD staff are not attorneys. They may not be able to answer your questions if you present an unusual situation. Opinions offered by staff are not binding on the Department. If you want to consult with an attorney, you can contact the Oregon State Bar Lawyer Referral Service at 1-800-452-7636. Ask for an attorney familiar with transportation law.

Additional information is available online at <https://www.oregon.gov/odot/MCT/Pages/Commercial-Vehicle-Licensing-Services.aspx>.

CCD staff must determine whether applicants are fit, willing and able to provide the proposed service. Staff review each applicant's application, highway use tax payment and audit history, bond and insurance filing history, regulatory compliance history, criminal background information and safety records. Your application may be returned to you unprocessed if requested information is not provided. Use the checklist provided to ensure you have completed all steps and provided all documents to reduce processing times. If CCD intends to deny your application, we will notify you of the reason for the proposed denial and provide you with information regarding how to request a hearing. If you request a hearing, you will be notified of the time and place of the hearing.

Applicant Standards – OAR 740-035-0165

An applicant must show that it is fit, willing and able to provide the service sought in compliance with ORS Chapter 825 and Department rules. For the purpose of this application:

- (1) "Fit" means that the applicant has not, during the five years preceding the application, been convicted of a crime punishable by imprisonment for a period of time in excess of one year under the law under which he or she was convicted, or a crime regardless of punishment involving Theft; Burglary; Sexual conduct; Manufacture, sale or distribution of a controlled substance; Identity theft; or False statements.
- (2) "Willing" means the applicant is prepared to provide all service sought in the application in compliance with ORS Chapter 825 and Department rules; and
- (3) "Able" means the applicant has or can provide adequate facilities, vehicles and equipment to perform the service proposed; the applicant certifies that these vehicles comply with all Oregon laws and rules covering vehicle safety and operations and will be so maintained; and there is no significant evidence concerning the proposed service submitted by the applicant, by members of the public, or in the department's files that suggests a compelling reason to deny the application. Examples of evidence of a compelling reason to deny an application may include a record of a pattern of violations of laws or rules administered by the Department, or two or more complaints from customers regarding applicant's unsatisfactory resolution of loss or damage claims.

The Application Process Checklist

Before submitting your application for an Oregon Intrastate Certificate to Transport Household Goods:

1. ☐ **Register your business**, including your Assumed Business Name (ABN) if you have one, with the Oregon Secretary of State / Corporation Division. If you plan to operate as an individual or partnership under an assumed business name, a Limited Liability Company (LLC), or as a corporation, the name of your business must be registered with the Oregon Corporation Division. You do not need to submit any registration papers from the Oregon Corporation Division with this application. ODOT will confirm your registration with the Corporation Division.
2. ☐ **Obtain your Federal Employer Identification Number (FEIN)** from the Internal Revenue Service (IRS) and include a copy of the verification letter (CP-575) issued to applicant.
3. ☐ **Obtain your Oregon Business Identification Number (BIN)** from the Oregon Department of Revenue and include a copy of the verification letter issued to applicant.
4. ☐ **Register your business with the Federal Motor Carrier Safety Administration** and provide your USDOT Number on your Application for Motor Carrier Account. Ensure you register your ABN if you have one.
5. ☐ **Submit an Application for Motor Carrier Account** (form 9075) for your business.
6. ☐ **Submit a Power of Attorney** if joining a tariff bureau. You must file a tariff with your application. Your tariff must be approved by ODOT before a certificate is issued. If you wish to submit an independent tariff for approval, this will increase the time needed for the Department to complete the processing and approval of both your application and individual tariff. You can meet tariff requirements in one of these ways:
 - Join an existing tariff and submit a Power of Attorney for that tariff bureau. This is the most common way.
 - Have a tariff bureau or publishing agent publish an individual tariff for you.
 - Submit a complete individual tariff meeting ODOT requirements.
7. ☐ **Include a copy of the current registration for each vehicle to be used in your operation.** If operating interstate on a regular basis, apportioned registration is required. Oregon vehicle registration is subject to Oregon domicile requirements pursuant to ORS 803.360.
8. ☐ **Complete signed and dated vehicle rental or lease agreement** between the owner of the vehicle(s) and the business authorizing extended and exclusive use of vehicle(s) if you are not the registered owner.
 - Vehicle make, model, year, vehicle plate and state of issuance, Vehicle Identification Number (VIN) and gross Vehicle Weight Rating (GVWR).
 - Specific terms, conditions and exclusive use of the vehicle(s).
 - Effective date, duration and signatures of all parties to the agreement.
 - Contact information for all parties to the agreement.
9. ☐ **Complete signed and dated equipment point (terminal) rental or lease agreement** if you do not own the property. Lease/rental agreement must be between the owner of the property and the business, and include:
 - Complete address and brief description of the location.
 - Specific terms, conditions and stated use of the property.
 - Effective date, duration and signatures of all parties to the agreement.
 - Contact information for all parties to the agreement.
10. ☐ **Submit criminal background checks for all applicants and current subject individuals.** Applications must include a criminal background check for all owners, corporate officers, managers (if manager manages LLC) and those performing duties of a subject individual during the application process (such as an office manager). The background check must include all states the applicant has lived in for the five years immediately preceding the application submission. Criminal background checks will be used to determine an applicant's fitness. The Department reserves the right to request additional information when the Department is not satisfied that the information provided by the applicant is current, complete or valid. See OAR 740-035-0165 for more information about this requirement.
11. ☐ **Confirm your insurance provider offers the required cargo insurance.** Applicants must certify that they have cargo insurance coverage or other surety of at least \$10,000 to protect shippers against loss or damage to their household goods. Proof of the required coverage must be submitted by your insurance provider. Contact CCD at 503-378-5983 for insurance questions. Documentation may be submitted by fax to 503-378-5765 or email to CCDInsuranceSupport@odot.oregon.gov. If you intend to provide service only in Oregon and operate vehicles or combinations that exceed 26,000 pounds you must provide proof of Bodily Injury and Property Damage (BIPD) insurance coverage of at least \$750,000. If you operate interstate, your insurance filing with USDOT satisfies this requirement.
12. ☐ **Provide the application and \$300.00 application fee. Your application will not be processed until this has been done.** A \$300 application fee is required. Once an application is made, refund of the application fee is only

considered in limited circumstances where a request is made in writing prior to the Department's proposed decision and the Department finds that the request meets the requirements in ORS 825.180(2).

Instructions for Completing the Application

Page 1 – Type of Application: Select ‘new carrier’ if you are a first-time applicant.

Page 1 – Motor Carrier Legal Name and Address of Record:

- Name of carrier. This is the legal name of your business.
- Date of your application.
- Your Assumed Business Name (ABN) as registered with the Oregon Secretary of State / Corporation Division.
- Oregon Business Identification Number (BIN) issued to the business by Oregon Department of Revenue.
- Telephone number.
- Carrier mailing address.
- Carrier street address of your office and equipment point location(s).
- Carrier Entity Type as registered with the Oregon Secretary of State / Corporation Division
- Federal Employer Identification Number (FEIN) issued to business by the Internal Revenue Service and its state of incorporation or formation.
- Name, date of birth and title of individuals, partners, corporate officers or manager if a manager managed LLC.
- Certification of owner, all partners or a corporate officer.

Page 2 – Financial Statement:

Financial fitness and ability to provide the proposed service are evaluated. A complete and accurate Financial Statement (balance sheet) and either a current income statement for the prior year or a projected income statement for the upcoming year will be used to determine if an applicant meets those standards. Provide a current statement of financial condition for the applicant as of the date of the application, **or** the most current financial statement available. You may be required to amend, clarify and/or substantiate the information you provide.

Assets

Cash / Bank Accounts	Available funds on hand as of the date of the financial statement.
Accounts Receivables	Value of funds customers owe Applicant for goods/services already invoiced.
Notes Receivables	Value of notes receivables; asset accounts tied to any promissory notes between the “payee” (Applicant) and the “maker” of the note.
Materials and Supplies	Value of materials/supplies owned by Applicant (may include dollies, moving blankets, ramps, straps, cargo stability materials, etc.).
Vehicles (if applicable)	Equity value of vehicles currently owned by Applicant.
Real Estate	Equity value of property currently owned by Applicant.
Other Assets	Value and description of Applicant’s additional assets.
Total Assets	Value of all assets included on the application.

Liabilities

Accounts Payables	Funds Applicant owes to others (Including, but not limited to, electricity, phone, rental/lease/maintenance of business location, fuel, insurance, etc.).
Notes Payables	Value of payables for promissory notes between Applicant (the “maker” of the note) and its financiers (Including, but not limited to, banks, other financial institutions, investors/associates, friends, family, etc.).
Salaries/Wages Payables	Wages owed for work performed by those working for, or on behalf of, Applicant as employees, agents or representatives.
Accrued Taxes / Licenses	Local, state, federal or foreign taxes and licensing fees owed resulting from Applicant’s proposed services.
Vehicles (own, rent, lease)	Value of costs for vehicle finance, rental or lease.
Vehicles (maintenance, fuel)	Value of costs for vehicle maintenance and/or fuel.
Rented/Leased Facilities	Value of costs for rented and/or leased offices and equipment points.
Other Liabilities	Value and description of Applicant’s additional liabilities
Total Liabilities	Value of all liabilities included on the application.

Total net worth	Calculated by subtracting Total Liabilities from Total Assets.
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Page 2 – Income/projected income statement of applicant:

Provide a **projected** gross annual income statement representing the first year of operations after a certificate is issued. You may be asked to amend, clarify and/or substantiate the information you provide.

Reporting Period	Provide a year or month/year through month/year reporting period.
Operating Revenues	
Local Cartage	Revenues from local cartage service.
Other Than Local Cartage	Revenues from other than local cartage service.
Interstate Moving	Revenues from interstate moves
Warehousing	Revenues from sales of warehousing and/or storage-in-transit services.
Packing Materials / Supplies	Revenues from sales of materials and supplies.
Other Revenues	Revenues resulting from, or in furtherance of, other for-hire transportation services provided in Oregon.
Total Revenues	Total of projected gross annual income resulting from sales of transportation services in Oregon.
Operating Expenses	
Salaries / Wages / Benefits	Wages of those working for / on behalf of Applicant.
Payroll Taxes	Federal and Oregon payroll taxes.
Business Income Taxes (Oregon And Federal)	Oregon and federal business income taxes accrued.
Fuel/Maintenance Expenses	Fuel expense / vehicle maintenance expenses
Utilities	Expenses for offices and/or equipment points.
Rent	Expenses for rental or lease of office and/or equipment point locations.
Insurance	Expense for motor carrier liability / cargo insurance.
Other Operating Expenses	Expenses of Oregon transportation services.
Total Expenses	Total operating expenses resulting from projected sales of transportation services in Oregon.
Annual Net Profit Before Taxes	Calculated by subtracting "Total Projected Annual Operating Expenses" from "Total Projected Operating Revenues."
Annual Taxes	Income tax liability for Oregon transportation services.
Net Income	Calculated by subtracting "Projected Annual Taxes" from "Projected Annual Net Profit Before Taxes."

Page 3 – Tariff Participation:

Select the tariff that you will be participating in. The resources page in this packet includes contact information for OMSA and ARB.

Page 3 – Territory, Other Than Local Cartage Service:

This is usually applied for by county and applies to moves that are greater than fifty (50) air miles between the shipment origin and destination points. Approval of territory is determined after a review of each carrier's application and information. Origin counties requested should be within a 150 air-mile distance from your equipment point location(s).

Destination counties requested are listed in alphabetical order or you may request to serve all points in Oregon as destination points. See examples written in good form (below):

- Between all points in Clackamas, Hood River, Multnomah, Washington and Yamhill counties; and from all points within those counties, to all points in Benton, Lane, Lincoln, Linn and Deschutes counties.
- Between all points in Benton, Lane, Lincoln, Linn, Marion and Polk counties; and from all points within those counties, to all points in Oregon on the other.

Page 3 – Territory, Local Cartage Service:

This is usually applied for by city or commercial zone and applies an hourly rate to local moves conducted wholly within the air mile radius of the city or commercial zone authorized by the carrier's certificate. See Oregon Administrative Rule (OAR) 740-060-0110 for a list of designated commercial zones. Collective rate tariffs limit origin to destination hourly rates to the Portland and Salem commercial zones. Most local cartage shipments apply a terminal-to-terminal hourly rate for local

cartage service shipments. Equipment point(s) / terminal location(s) must be located within the proposed local cartage service area if the tariff rate to be applied is a terminal-to-terminal hourly rate. See examples below written in good form:

- Within the Portland commercial zone.
- Within Portland and Salem commercial zones.
- Within the Eugene commercial zone and within the corporate city limits of Springfield.
- Within the corporate city limits of Bend, Prineville and Redmond.

Page 3 – List of all equipment (power vehicles only):

Provide the requested information for each vehicle intended to be used in the business. If applicant will be renting vehicles from a truck rental company “as needed”, check the box stating you have no equipment and will use only rental equipment at this time, or check the box (same as above) and add a note stating you will use the equipment on your application and utilize rental equipment as needed.

Compliance Reminders

Familiarize yourself with applicable law for motor carriers operating in Oregon intrastate commerce transporting household goods for-hire. It is **your** responsibility to understand and comply with these regulatory requirements. You will be subject to periodic audits by the Department. Confirm information included in your application is current and does not conflict with information you have provided to other government agencies. Failure to remedy conflicting information may result in the delay of processing and approving your application.

ORS 825.100 prohibits the transportation of persons or property without possessing a valid certificate or permit issued by the Oregon Department of Transportation authorizing the proposed operation. ORS 825.950(1)(b) provides that, in addition to all other penalties provided by law, every person who violates or procures, aids or abets in the violation of ORS 825.100 by offering to transport OR transporting household goods without a certificate shall incur a civil penalty of not more than \$1,000.00 for every such violation.

Resources For Motor Carriers Applying for an Oregon Intrastate Certificate to Transport Household Goods

Resources	Phone Number(s)	Mailing Address	Website Information
Oregon Department of Transportation (ODOT) Commerce and Compliance Division (CCD)	503-378-5983	Mailing Address: 455 Airport Road SE, Building A Salem, OR 97301	Household Goods Moving in Oregon: Information for Carriers and Consumers: www.oregon.gov/odot/MCT/Pages/Household-Goods-Moving.aspx . Application Forms: www.oregon.gov/ODOT/Forms/Motcarrier/Household%20Goods%20Application%20Forms.pdf
Acceleration Transportation Rate Bureau, Inc. (ARB)	503-598-7451	Mailing Address: PO Box 19796 Portland, OR 97280-0796	https://arbmovers.com/
Oregon Moving and Storage Association (OMSA)	503-513-0005	Mailing Address: 4005 SE Naef Road Portland, OR 97267	https://ormsa.com
Federal Motor Carrier Safety Administration (FMCSA)	503-399-5775 800-832-5660 303-407-2350	Mailing Address: 1200 New Jersey Ave. SE Washington, DC 20590	www.fmcsa.dot.gov/registration/do-i-need-usdot-number
Oregon Secretary of State Corporation Division (OR SOS)	503-986-2200	Mailing Address: Public Service Building 255 Capitol St. NE, Suite 151 Salem, OR 97310	sos.oregon.gov/business/Pages/register.aspx



OREGON DEPARTMENT OF TRANSPORTATION
COMMERCE AND COMPLIANCE DIVISION
455 Airport Road SE, Building A
Salem, OR 97301
Phone: 503-378-5983
Fax: 503-378-5765

Application For an Oregon Intrastate Certificate to Transport Household Goods

Type of Application				
☐ NEW CARRIER ☐ NAME CHANGE ☐ ADDRESS/PHONE/EMAIL CHANGE ☐ ACCOUNT AMENDMENT ☐ OWNERSHIP CHANGE				
Motor Carrier Legal Name and Address of Record				
NAME OF CARRIER			DATE	
DOING BUSINESS AS (DBA OR ABN IF APPLICABLE)		OREGON BUSINESS IDENTIFICATION NUMBER		TELEPHONE NUMBER
CARRIER MAILING ADDRESS		CITY	STATE	ZIP
CARRIER STREET ADDRESS - OFFICE (IF DIFFERENT THAN ABOVE)		CITY	STATE	ZIP
CARRIER STREET ADDRESS - EQUIPMENT POINT (IF DIFFERENT THAN ABOVE)		CITY	STATE	ZIP
☐ INDIVIDUAL OWNERSHIP ☐ PARTNERSHIP ☐ LIMITED LIABILITY COMPANY (LLC) ☐ CORPORATION			☐ OTHER - (PROVIDE TYPE OF OWNERSHIP)	
			STATE OF INC	FEIN
Complete Name, Date of Birth and Title of Individual, Partners, Corporate Officers or Manager (If Applicant is a Manager-Managed LLC)				
LAST	FIRST	MIDDLE	DATE OF BIRTH	TITLE
LAST	FIRST	MIDDLE	DATE OF BIRTH	TITLE
LAST	FIRST	MIDDLE	DATE OF BIRTH	TITLE
Certification				
I (we) hereby make application for authority to provide for-hire transportation of household goods in intrastate commerce and certify that application and supplemental materials content is true and correct, that no material fact has been omitted, that there is no person having any interest, directly or indirectly, in the ownership, possession, or control of the equipment listed or the operations to be conducted than is herein stated and the submission of this application does not constitute authority to operate. I (we) further certify that vehicles listed are in such operating order and so equipped as to comply with all Oregon laws, rules, and regulations covering vehicle registration, safety and operations and will be so maintained. I (we) agree to pay the fees and taxes required by Oregon law and provided for in Oregon revised statutes chapter 825 and 826 and to comply with the provisions thereof and obey all the rules and regulations of the Oregon Department of Transportation. I (we) understand household goods is a commodity requiring motor carrier cargo insurance in the minimum amount of \$10,000 that is in effect and on file with the Department.				
Complete Name, Signature and Social Security Number of Owner, All Partners or a Corporate Officer				
COMPLETE PRINTED NAME	SIGNATURE		SSN, IF NO FEIN PROVIDED ABOVE	
COMPLETE PRINTED NAME	SIGNATURE		SSN, IF NO FEIN PROVIDED ABOVE	
COMPLETE PRINTED NAME	SIGNATURE		SSN, IF NO FEIN PROVIDED ABOVE	

Submit an additional signature addendum page for any additional applicants for this operating authority.

Financial Statement:

Instructions: Applicant must provide the information below detailing a complete statement of financial condition as of the date of filing this application, or the most current date for which financial information is available.

BALANCE SHEET STATEMENT OF	DATE OF BALANCE SHEET
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Assets		Liabilities	
Cash / Bank Accounts	\$	Accounts Payables	\$
Accounts Receivables	\$	Notes Payables	\$
Notes Receivables	\$	Salaries / Wages Payables	\$
Materials and Supplies	\$	Accrued Taxes / Licenses	\$
Vehicles (if applicable)	\$	Vehicles (acquisition, rental, lease)	\$
Real Estate (equity)	\$	Vehicles (maintenance, fuel)	\$
Other Assets (describe and provide separately if necessary)	\$	Rented / Leased Facilities (office(s) and equipment point(s))	\$
		Other Liabilities (describe and provide separately if necessary)	\$
Total Assets:	\$	Total Liabilities:	\$

Total net worth: \$ _____

Income/projected income statement of applicant: **Year:** _____

Operating Revenues		Operating Expenses	
Local Cartage Moving Sales	\$	Salaries / Wages / Benefits	\$
Other than Local Cartage Moving Sales	\$	Payroll Taxes	\$
Interstate Moving Sales	\$	Oregon Income Tax	\$
		Federal Income Tax	\$
Warehousing Sales		Fuel / Vehicle Maintenance	\$
Packing Materials / Moving Supplies Sales	\$	Facility Utilities / Rent	\$
		Insurance	\$
Other Revenues (describe and provide separately if necessary)	\$	Other Expenses (describe and provide separately if necessary)	\$
Total Revenues:	\$	Total Expenses:	\$

Net profit before taxes (pretax income): \$ _____

Taxes: \$ _____

Net income: \$ _____

Tariff Participation:

Tariff (select tariff type)		
☐ OMSA	☐ ARB	☐ Independent Tariff
Territory – See instructions for examples of approved territory descriptions written in good form.		
Other than local cartage service: Specifically state the territory or area you propose to serve.		
Local cartage service: Specifically state the commercial zones and/or cities you propose to serve.		

List of Equipment (Power Equipment Only):

Instructions: List only the power vehicles intended to be used in providing the requested transportation service. Include the solo weight and any applicable combination weight(s) in addition to the other requested information in the table below. Continue on another page if necessary. **If any weight combinations exceed 12,000 pounds and you operate interstate, you will need apportioned plates.**

Body Type	Make Of Vehicle	Vehicle Identification Number (VIN)	Company Number	Weight Declarations				O - Owned L - Leased R - Rented	Base License Plate Number(State)
				Solo	Combinations				

☐ I (We) have no equipment and use only rental equipment, as needed, at this time.

I have included these documents with my application:	Documents that may be needed based on instructions and your business:
☐ Verification letter for Business Identification Number (BIN) ☐ Verification letter for Federal Employee Identification Number (FEIN) ☐ Application for Motor Carrier Account (form 9075) ☐ Current registration for each vehicle ☐ Criminal Background Check (CBC) for each applicant ☐ \$300 Application fee	☐ Power of Attorney for OMSA or ARB (needed unless you are publishing your own tariff) ☐ Equipment point (terminal) lease/rental agreement ☐ Vehicle lease/rental agreement