Nevada Transportation Authority Process to Apply for a CPCN to Transport Passengers or Household Goods

Determine your Transportation Authority

Review NRS 706 and NAC 706 definitions to determine which authority applies to your business model. The statutes and regulations are available at http://nta.nv.gov/About/Regulations_Page/

Complete the Checklist

Complete this checklist if applying for the following transportation authorities:

- Airport transfer, charter limousine, contract carrier, household goods mover, non-emergency medical, scenic tour, and special services traveling within the State of Nevada.
- Taxi service traveling outside of Clark County, Nevada and within the State of Nevada.

Reviewed/audited financial statements prepared by a CPA will expedite the process for these authorities.

If applying for charter bus service or transportation network company (TNC) authorities, these applications are available at http://nta.nv.gov/Forms/New_Applicant_Forms/. No financials are required.

Exemptions - review NRS 706.735-745 to apply for an exemption. The application is available at http://nta.nv.gov/uploadedFiles/ntanvgov/content/Forms/RequestforExemption.pdf and there is no fee.

Follow NAC 706.3949 and NAC 706.1325 to request confidentiality of documents.

Call our office at 702-486-3303 option 5 to set up an appointment with staff to review your documents. Documents must be completed correctly for staff to accept payment.

Provide Copies and Payment

Once staff determines your documents are complete, staff will request:

Copies:

- An original and 2 copies (3 collated copies total) of the application (Item #1 of the checklist)
- An original and 1 copy (2 collated copies total) of the financials (Items #2 through #7 of the checklist)
- Copy only on one side of the paper and separate each collated copy with a binder clip or rubber band.

Payment:

Checks, money orders (made payable to Nevada Transportation Authority), and credit cards are accepted. The
fee schedule is at http://nta.nv.gov/uploadedFiles/ntanvgov/content/Forms/FilingFee_PublicationCost-Schedule.pdf

Additional costs may include paying additional noticing costs, hiring a court reporter, attorney, accountant or CPA.

A completed application can be purchased and used as an example. The request form is available at http://nta.nv.gov/uploadedFiles/ntanvgov/content/Forms/RequestForPublicInformationCopies-ADA.pdf.

Procedure	Completed	Notes
1. Complete the application starting on page 4. When completing the		
application:		
Ensure the tabs and your documents are prepared according to the directions		
listed in the application.		
Exhibit H -		
• Use the tariff template available at http://nta.nv.gov/Forms/New Applicant Forms/		
Review NAC 706.138 through NAC 706.139.		
• For all authorities, include NAC 706.333.		
• For household goods authority, include NACs 706.312, 706.334, and		
706.335.		
• For charter limousine authority, you may charge a fuel surcharge. Use the		
model tariff page available at http://nta.nv.gov/Forms/Fuel Surcharge Model/		
• For all authorities, except for airport transfer, you may charge a 3%		
Passenger Transportation Tax. Use the model tariff page available at: http://nta.nv.gov/Forms/Passenger Transportation Tax Forms/		
Review tariffs from other certificated carriers as an example available at		
http://nta.nv.gov/Carriers/Tariffs-Certificates/		
Exhibit I - add the following counts in the exhibit that are applicable: # of new		
(proposed) vehicles + # of existing vehicles = Total # of vehicles.		
(Note: do not purchase any vehicles during this process)		
Exhibit M - New certificates or expansion of existing certificates for: airport		
transfer, charter limousine, special services, non-emergency medical, and		
special services: provide letters of intent, supporting documentation and		
contact information. What's quantified in the letter/documentation must be		
used to project revenues and expenses in the pro forma income statement in d		
below.		
Exhibit Q - pro forma income statement - separate projected monthly revenues		
and expenses from existing ones if the applicant is an ongoing operation.		
2. Provide a pro forma balance sheet ("PFBS") on an accrual basis for the		
Applicant. Use the balance sheet included in the Authority's Annual Report		
and follow its instructions. (Note: an updated PFBS may be requested by		
staff). When completing the PFBS:		
Total assets must equal total liabilities plus equity.		
Do not include projected sales.		
• Include all new vehicles in the asset and liability sections.		\$ 90-day expenses
• Ensure it has, at a minimum, 20% equity (total equity/total assets).		
• Ensure it has, at a minimum, a 1 to 1 current ratio (current assets/current		
liabilities).		% current ratio
• Ensure the cash balance can cover 90-days' worth of fixed expenses in		
addition to the equity and current ratio requirements.		
• Review NAC 706.208 if vehicles will be leased. Charter limousines must		% equity ratio
be either financed or under a capital lease.		
• Include existing assets and liabilities if the applicant is an ongoing		
operation.		
3. Provide documentation to support each balance on the PFBS.		
a. When compiling the documentation, use the following method to mark the		
documentation: label each balance on the PFBS with a letter (a, b, c, etc.)		
and label the related documents with the same letter.		
b. When compiling the documentation for the vehicles:		
 Provide vehicle quotes and loan amortization schedules for new vehicles. 		
2.25.136 remete quotes and roun amortization schedules for new vellicles.		

Procedure	Completed	Notes
• Provide bills of sale, finance/lease agreements, loan amortization schedules,		
and loan bank statements for existing vehicles.		
• Provide a lead schedule for all new and existing liabilities. Include the last		
4 of the VIN #s for existing vehicles.		
 Provide a depreciation schedule that includes all new and existing assets. 		
Include the last 4 of the VIN #s for existing vehicles.		
• Use the depreciation schedule included in the Authority's Annual Report		
and follow its instructions. Charter limousine is required to be depreciated		
on a straight-line basis over 5 years with no salvage value. All others		
require straight line basis.		
4. Provide narratives to the pro forma income statement ("PFIS") that was		
submitted in Exhibit Q. (Note: An updated PFIS may be requested by staff).		
When completing the narratives:		
• Ensure there is a narrative for every revenue and expense line item.		
 Projected revenues and expenses—include sufficient calculations and 		
supporting documents for staff to follow how the amounts were projected.		
• Projected revenues—include calculations that tie the projected revenues to		
Exhibit M.		
• If the applicant is an ongoing operation, narratives can state "based on		
historical data" for existing revenues and expenses.		
5. Provide the following if the Applicant is an ongoing operation:		
(Items marked with a "**" are the only documents required if reviewed or		
audited financial statements are provided.)		
 All business bank statements for the previous calendar year. 		
 Actual balance sheet used to prepare the PFBS. 		
 Income statement for the previous calendar year. 		
(Note: updated financials may be requested by staff)		
• Tax returns and schedules for the 2 most recent years.		
• IRS transcripts for the 2 most recent years from the IRS' website.		
• The number of drivers that are currently employed by the applicant**		
6. Provide the following for each owner of the Applicant if the Applicant is a		
start-up company. For all other Applicants, Staff will determine during the		
review process if this information is required.		
 All personal bank statements for the previous calendar year. 		
• Tax returns and schedules for the 2 most recent years.		
• Credit report authorization form (form included in application in #1).		
• IRS transcripts for the 2 most recent years from the IRS' website.		
• Net worth statement and documentation supporting each balance. Label the		
documentation using the same method used for the documentation to the		
PFBS.		

Include the following revenues and expenses in the PFIS (Exhibit Q):

Revenues **Drug Testing** Office Supplies Telephone Advertising Payroll1 Utilities Fuel Surcharge Revenues Payroll Taxes Bank Charges

Vehicle Insurance² provide a quote

Broker Fees General Liability Insur. Professional Fees Vehicle Registration

Claims Interest Repairs/Maint. Workman's Compensation, provide a quote

Credit Card Fees Internet Rent Depreciation Licenses (business, etc.) Storage

¹ Separate payroll for drivers, dispatch, management, etc. and list the number of employees that are and will be employed in each category.

² Refer to NAC 706.191 for vehicle insurance minimum requirements.

State of Nevada

Department of Business and Industry

Nevada Transportation Authority

Application for a Sale and Transfer of a Certificate or Order and Permit to Transport Passengers or Household Goods filed pursuant to NAC 706.1375.

(Check one type of carrier) Common Carrier Contract Carrier	(Check one type of service) Taxi Cab Household Goods Mover Other Passenger Carrier (not bus)
Seller's Name:	_
dba	_
Buyer's Name:	
dba	
Check One: Purchase Stock	% □ Purchase Assest/Authority
Certificate number:	_
Attached and labeled with tabs accordance with NAC 706.1375	s hereto; exhibits that include all of the information required in 5 (2) (a through u).
Wherefore, Applicant requests the Certificate or Permit prayed for.	ne Nevada Transportation Authority enter its order granting the
Dated at	Nevada, thisday of20
X Attorney' signature (if any)	X Applicant's signature
Attorney's printed name	Applicant's printed name
Attorney's address	Applicant's mailing address
Attorney's address cont.	Applicant's address cont.
Attorney's phone number	Applicant's phone number
Attorney's facsimile number	Applicant's facsimile number
Attorney's email address	Applicant's email address

Filing Instructions:

Make certain your application is complete and accurate. Incomplete applications or those with illegible text may be rejected.

Do not enclose original or copies within binders, folders, or other devices. Preferred methods are a single staple, or binder clips.

Be certain to insert labeled tabs between exhibits. If an exhibit does not apply to you insert a page explaining that the exhibit does not apply.

When complete, file an original and three (3) copies of this application along with the required filing fee and estimated publication costs to:

Nevada Transportation Authority 3300 W. Sahara Ave, Suite 200 Las Vegas, NV 89102

The NTA accepts checks, cash, and money orders.

Our office hours are 8:00 am to 5:00 pm Monday through Friday, excluding holidays.

If you have any questions, call us at 702-486-3303.

Included in this application packet is a checklist of attachments and exhibits to help you put together a complete application. For detailed explanation and instruction for each exhibit, you must refer to the most current NAC 706.1375 (2) (a through u). Your application cannot be completed without referring to NAC Chapter 706 for instructions.

Please notice that the exhibits are labeled (a) through (u) to correspond with the NAC 706.1375 (2) (a through u).

•	DATH
STATE OF)
)
COUNTY OF)
I,	, being duly sworn,
	te relationship to applicant, i.e.: owner, title
	; that, in such
	o file and verify such application; that I have
carefully examined all the statements an	d matters contained in the application; and
that all such statements made and matte	ers set forth therein are true and correct to
the best of my knowledge, information, a	and belief. Affiant further states that the
application is made in good faith and pre	esents evidence in support of said application
on every particular requested by the Nev	vada Transportation Authority.
	Signature of Affiant
Subscribed and sworn to before me this	
day of,	·
Notary Public	
	Signature of Attorney, if any

Therefore, the joint applicants request the Nevada Transportation Authority enter its order granting the Certificate transfer.

Dated the	_day of _		,20
Signature of Seller		Signature of Buyer	
Name of Seller (print or type)		Name of Buyer (print	or type)
Physical Address		Physical Address	
Mailing Address		Mailing Address	
City, State, Zip		City, State, Zip	
Phone Fax	ζ	Phone	Fax
Applicants' Attorney (if any)			
Signature of Attorney			
Name of Attorney (print or type)			
Address			
City, State, Zip			
Phone Fax			

OATH OF SELLER

STATE OF)
COUNTY OF) SS
as (indicate relationship to seller, that is, or association, partner of applicant partner; verify such application; that I have carefull application; and that all such statements made a	being duly sworn, state that I file this application where or proprietor, title as officer of applicant corporation or earship or other authorized representative of applicant; that in such capacity I am qualified and authorized to file and ly examined all the statements and matters contained in the and matters set forth therein are true and correct to the best of my ther states the application is made in good faith, with the intention cry particular.
	Signature of Affiant
Subscribed and sworn to before me, a Notary Public, in and for the state and county above named, this day of	
Notary Public (Se	eal)
STATE OFCOUNTY OF	DATH OF BUYER O SS
COUNTY OF)
as (indicate relationship to buyer, that is, or association, partner of applicant partne ; verify such application; that I have carefull application; and that all such statements made a	, being duly sworn, state that I file this application where or proprietor, title as officer of applicant corporation of each or other authorized representative of applicant that in such capacity I am qualified and authorized to file and ly examined all the statements and matters contained in the and matters set forth therein are true and correct to the best of my ther states the application is made in good faith, with the intention cry particular.
	Signature of Affiant
Subscribed and sworn to before me, a Notary Public, in and for the state and county above named, this day of	
Notary Public (Seal)	

LETTER TO ALL APPLICANTS FOR A CERTIFICATE TO PROVIDE INTRASTATE TRANSPORTATION OF PASSENGERS OR HOUSEHOLD GOODS

To All Applicants:

Nevada Administrative Code (NAC) Chapter 706 relates to the regulation and licensing of motor carriers regulated by the Nevada Transportation Authority ("NTA"). It is essential for you to understand and comply with selected statutes and regulations in order to successfully obtain a Certificate of Public Convenience and Necessity from the NTA.

To ensure that you understand the regulations governing the transportation industry, you will need to reference Nevada Revised Statutes (NRS) 706 and Nevada Administrative Code (NAC) 706. All Nevada Statutes and Regulations are available on the Legislative website at www.leg.state.nv.us. For your convenience, direct links to NRS 706 and NAC 706 are available on the NTA website homepage at the "Statutes and Regulations" tab. You may also obtain a copy of N.R.S. 706 &/or N.A.C. 706 from the NTA for a nominal copy charge.

NAC 706.1375(2) lists the required contents for applications for a certificate to provide intrastate transportation of passengers or household goods in the state of Nevada. NAC 706.1375(3) states that if the Applicant does not cure any deficiency in the application within fifteen (15) working days after a request from the NTA, the NTA shall move that the application be dismissed.

When your application is filed, it will be assigned a docket number, by which the NTA will reference your filings. Please refer to your docket number on any correspondence or conversations you have with our staff.

If you have any questions relating to the completion of this application, please call our Las Vegas office at (702) 486-3303 or our Reno office at (775) 687-9790. If you have specific questions that require a legal or detailed analysis, please contact an attorney.

Respectfully,

Nevada Transportation Authority

ACKNOWLEDGEMENT OF RECEIPT AND UNDERSTANDING OF LETTER TO APPLICANTS FOR A CERTIFICATE TO PROVIDE INTRASTATE TRANSPORTATION OF PASSENGERS OR HOUSEHOLD GOODS

To the Nevada Transportation Authority:
I have read and understand the contents of the letter addressed to all applicants for a certificate to provide intrastate transportation of passengers or household goods, which was included in my application packet.
Signature
Printed Name
Date

Checklist for attachments and exhibits for: Application for a Certificate to Provide Intrastate Transportation of Passengers or Household Goods filed pursuant to NAC 706.1375

Attach completed cover page (1 st page) of this application.
Attach completed OATH page.
Attach completed ACKNOWLEDGMENT OF RECEIPT OF LETTER TO APPLICANTS FOR CERTIFICATE TO PROVIDE INTRASTATE TRANSPORTATION OF PASSENGERS OR HOUSEHOLD GOODS.
Attach this completed Checklist.
Identify the market the applicant intends to service, demonstrating that such market will support the proposed operations.
Label and Tab EXHIBIT (a) The type of service, if any, presently being performed by the applicant, a general description of the service and a reference to the authority pursuant to which the service is being performed.
Label and Tab EXHIBIT (b) The type of service proposed, a general description of the service, and a reference to the authority pursuant to which the service is to be performed.
Label and Tab EXHIBIT (c) The specific authority requested and the statutory provision pursuant to which the certificate is requested.
Label and Tab EXHIBIT (d) If the applicant proposes to be a carrier of household goods, a description of the types of household goods proposed to be transported.
Label and Tab EXHIBIT (e) The geographical area proposed to be served pursuant to the certificate, including, without limitation, the terminal and other points to be served, the number and location of points where equipment will be located, and a concise, narrative description of the proposed route.
Label and Tab EXHIBIT (f) A map or sketch of the route and points to be served, drawn to a suitable scale which is indicated on the map or sketch. The map or sketch must show present and proposed operations by distinctive coloring or marking.
Label and Tab as EXHIBIT (g) If the applicant proposes to be a contract carrier, a copy of each proposed contract.

Label and Tab as EXHIBIT (h) A statement of the rates or fares proposed to be charged and the rules governing service in the form of a tariff prepared pursuant to NAC 706.138 to 706.139, inclusive.
Label and Tab as EXHIBIT (i) The type and number of units of equipment to be used in the proposed service and a statement as to which units of equipment are owned by the applicant that includes, without limitation, photographs of the equipment to be used and a copy of the registration and title of each vehicle currently owned by the applicant which will be used under its operating authority. If the applicant proposes to operate a taxicab service, the application must include the proposed color scheme of the vehicles that will be used to provide the taxicab service.
Label and Tab as EXHIBIT (j) A statement indicating the frequency of the proposed service. If on-call service is proposed, the application must set forth the conditions under which the service would be performed.
Label and Tab as EXHIBIT (k) A statement of the qualifications and experience of the personnel who will manage and operate the proposed service, and the proposed operating procedures relating to service, safety, maintenance, the training of drivers, billing, relations with customers and the keeping of records.
Label and Tab as EXHIBIT (l) A statement describing the facilities which will be used to provide the proposed service, such as terminals, shops, warehouses or offices.
Label and Tab as EXHIBIT (m) Facts showing that the proposed operation is or will be beneficial to the traveling public.
Label and Tab as EXHIBIT (n) If the applicant is a corporation or a limited-liability company, a copy of its articles of incorporation or articles of organization, certified by the Secretary of State, and all effective amendments thereto. If the corporation or limited-liability company was incorporated or established in another state, the application must include: 1. A copy of the certificate issued by the office of the Secretary of State authorizing the corporation or limited-liability company to transact its business in the State of Nevada: or 2. Its equivalent, as provided in NRS 80.120.
Label and Tab as EXHIBIT (o) If the applicant is a partnership, a copy of the partnership agreement and any amendments made thereto.
Label and Tab as EXHIBIT (p) If the applicant is not a natural person, a list of all owners, including associated stock certificates, membership certificates or associated documents, along with the percentage of ownership interest of each partner, member or owner. If the applicant is a publicly traded corporation, the requirements of this paragraph may be satisfied by attaching to the application a copy of the Form 10-K or its equivalent filed with the Securities and Exchange Commission shows the controlling ownership, officers and directors in lieu of the list of all owners, including associated stock certificates, membership certificates or associated documents.
Label and Tab as EXHIBIT (q)

Evidence that the applicant is financially able to operate the proposed business, including, without limitation:

- 1. A statement of income for the 12-month period immediately preceding the application.
- 2. A pro forma statement of income for the first 12-month period, presented in a monthly basis format, of the proposed operation using the proposed rates. The Nevada Transportation Authority may require, as a condition to the granting of the application, that the applicant is prohibited from placing into service more vehicles than the vehicles projected in the pro forma statement for any period that the Nevada Transportation Authority deems necessary to ensure that the granting of the application will not unreasonably and adversely affect other carriers operating in the territory.
- 3. A balance sheet which was prepared not more than 6 months before the date of the application which: (I) For a sole proprietorship or partnership, must reflect the personal and business operations of the sole proprietor or each general partner. (II) For a corporation, limited-liability company or partnership, must reflect the entire business operations.
- 4. A list of the names and addresses of all transportation entities owned by or under the control of the applicant.

NOTE: All financial statements must be prepared pursuant to generally accepted accounting principles, except that the personal financial statement of a sole proprietor or general partner may be prepared on the basis of estimated values.

Label and Tab as EXHIBIT (r) If the applicant is operating under a fictitious name, a copy of the certificate filed pursuant to chapter 602 of NRS, if applicable.
Label and Tab as EXHIBIT (s) Evidence that the applicant can secure the insurance required by NAC 706.191.
Label and Tab as EXHIBIT (t) If the applicant is proposing to transport and store household goods and effects, proof that the applicant has the ability to store such goods and effects in a warehouse operated in accordance with the requirement of chapter 712 of NRS. As used in this paragraph, "warehouse" includes, without limitation, any structure used for the reception and storage of household goods and effects.
Label and Tab as EXHIBIT (u) Additional information as is necessary for a full understanding of the application.

NOTE: Personal financial information that includes social security numbers, account numbers, etc., may be submitted with the application in a separate envelope (containing an original and nine copies) to ensure confidentiality.

NEVADA TRANSPORTATION AUTHORITY Credit Report Authorization Form

Authorization is hereby granted to the Nevada Transportation Authority (hereinafter "NTA") to obtain a consumer credit report through a credit reporting agency chosen by the NTA. I understand and agree that the NTA intends to use the consumer credit report for the purpose of evaluating my financial readiness to obtain a Certificate of Public Convenience and Necessity as a non-emergency medical transportation service designated as Docket No		
My signature below authorizes the release to information which I have supplied to the NT. Authorization is further granted to the credit reproduction of this form if required to obtain complete my consumer credit report.	A in connection with such evaluation. reporting agency to use a photostatic	
Social Security Number	Social Security Number	
Applicant's Name (Print)	Applicant's Name (Print)	
Applicant's Signature	Applicant's Signature	
Address:	Address:	
Number Street	Number Street	
City State Zip Code	City State Zip Code	
Date	Date	