Department of Business and Industry Nevada Transportation Authority

Request for Voluntary Cancellation of CPCN

n the matte	er of the request by	
		to cancel Certificate of Public
Convenien	ce and Necessity (CPCN) number:	
The above	named carrier is no longer conducting	operations or providing transportation
services au	uthorized under CPCN	
		, the authorized representative for
	nat the Nevada Transportation Authorit	_
understand	ling that this is not a suspension or a t	emporary discontinuance of service,
out a canc	ellation and that in order to provide a	ny transportation services in the future,
a new app	lication will have to be filed and a new	Certificate granted by the NTA.
	Signature of Petitioner	
	Printed name of Petitioner	
	Address	
	Phone number	Fax number
	Email address	

1.	Completely fill out the first page of this Voluntary Cancellation Request.	
2.	Briefly explain the reason you are requesting a cancellation of your certificate:	
3.	Have you removed all markings (name and CPCN number) from the vehicles?	
	Yes, they were removed on	
	No, I will remove them no later than	
4.	Complete the OATH page and have notarized.	
5.	Enclose/attach all vehicle decals and/or tow/taxi plates.	
6.	File all three pages of this Request (with all tow/taxi plates and/or decals) and mail or deliver to either of our office locations:	
Nevada Transportation Authority		
	3300 West Sahara Avenue 1755 E Plumb Lane	

INSTRUCTIONS:

Suite 200

Las Vegas, NV 89102

There is no fee for filing a Voluntary Cancellation Request. If you have any questions, please contact us at $702\ 486-3303$.

OR

Suite 229

Reno, NV 89502

OATH

STATE OF	}}
COUNTY OF	}}
I,	, being duly sworn, state
that I file this application as (indicate relation	onship to applicant, i.e. owner, title as officer,
etc.)	; that, in
such capacity, I am qualified and authorize	zed to file and verify such application; that I
have carefully examined all the statements	and matters contained in the application; and
that all such statements made and matters	s set forth therein are true and correct to the
best of my knowledge, information, and be	elief. Affiant further states that the application
is made in good faith, and presents evidence	ence in support of said application on every
particular requested by the Nevada Transpo	ortation Authority.
	Signature of Affiant
Subscribed to and sworn before me on this	
day of, 20	<u>.</u>
Notary Public	
Notary Fublic	
	Signature of Attorney, if any
Mailing address of applicant:	Mailing address of attorney:
Phone:	Phone:
Fax:	Fax:
Email:	Email:

Rev 10/11/19 Page 3 of 3