State of Nevada Department of Business and Industry Nevada Transportation Authority

Employer Van Pool Application and Renewal Form Pursuant to NRS 706.749

Ш	☐ Requesting Temporary Interim Authority						
	Renewal Application						
Company name:							
Ado	dress:						
Pho	one number:	Fax number:					
Ema	ail:						

The following exhibits are to be attached with labels and tabs to initial application for each vehicle to be operated by the company transporting employees. For renewal applications, the following information is required for any additional vehicle(s) you wish to add to your current fleet on record.

LABEL AND TAB AS EXHIBIT A

A copy of title or long-term lease for each vehicle to be used in the Employer Van Pool service. Include a copy of the registration for each vehicle and company unit number.

LABEL AND TAB AS EXHIBIT B

If employer intends to charge for the service, list the associated fee. The employer must not charge more than an amount required to amortize the cost of the vehicle and defray the cost of operating the vehicle for the use of service.

PLEASE NOTE:

Employer Van Pool Permits expire one (1) year from date of issue, and are for the assigned vehicle only so may not be transferred to another vehicle.

Affix Permit to the lower left corner (driver's side) of the front windshield.

Mail original application/renewal form and exhibits to the corresponding address listed below. Include permit fees (\$10 per vehicle) for renewal applications only. Permit fees for Initial Application will be due upon approval.

Initial Application

Renewal Application

3300 W. Sahara Ave, Suite 200 Las Vegas NV 89102 Phone: (702) 486-3303

1755 E. Plumb Lane, Suite 229 Reno NV 89502 Phone: (775) **687-979**0

	Contact person name, phone number and email:					
Unit #	Vehicle ID Number	License #	Vehicle Year & Make	Capacity	Pick up/Drop off & Workplace Location	

OATH

STATE OF	}}
COUNTY OF	}}
that I file this application as (indicate relation	, being duly sworn, state onship to applicant, i.e. owner, title as officer,; that, in
such capacity, I am qualified and authoriz have carefully examined all the statements that all such statements made and matters so of my knowledge, information, and belief.	ed to file and verify such application; that I and matters contained in the application; and et forth therein are true and correct to the best Affiant further states that the application is see in support of said application on every
	Signature of Affiant
Subscribed to and sworn before me on this	
day of, 20	
Notary Public	
	Signature of Attorney, if any