## APPLICATION FOR REGISTRATION OF VEHICLES OPERATED UNDER AUTHORITY ISSUED BY THE MONTANA PUBLIC SERVICE COMMISSION

Date:	PSC Operating Authority Number	
Company Name:		
Mailing Address:		
City:	State:	Zip Code:
If the company is adding additional please use this section.	onal vehicles to their operation	n after the annual renewal,
Applicant is <b>ADDING</b> , which the operation in the State of Mont	h represents \$5.00 registration for	cles being added) vehicles and or each vehicle being added to
For annual renewals, please use	this section:	
The above applicant hereby applicated number of vehicles which the Montana during the period for who December 31st of each year). The issued to the applicant by the Montana during the period for who issued to the applicant by the Montana during the period for who is the same applicant by the Montana during the period for the period fo	he applicant intends to operate which such registration receipt is experation of such vehicle(s) sha	within the borders of the state of effective (January 1 <sup>st</sup> through all be pursuant to authority
Applicant operates, which state of Montana for the year 202		vehicles operated) vehicles and or each vehicle operated in the
I, the undersigned, under penalty contained on this Application is to document on behalf of the above a	rue and correct and that I am aut	
Name:	Signature:	
Phone:	Email:	
If your application is not postm amount of \$25 per application. January 31, 2025 deadline, the a	If you are adding new vehicles	s to your operation after the
Please make check payable to:	Montana Public Service Con	mmission
Mail application and check to:	Montana Public Service Cor PO Box 202601	mmission

Helena, MT 59620-2601