



MOTOR CARRIER DIVISION
555 WRIGHT WAY
CARSON CITY, NV 89711-0600
(775) 684-4711
(775) 684-4619 fax
www.dmvnv.com

INFORMATION VERIFICATION

Please complete this form to ensure we have the most current and complete information.

Business Information

Account #: _____ Fleet #: _____ FEIN: _____ US DOT #: _____

Legal Business Name: _____ Doing Business As: _____

Contact Information

Name: _____ Title: _____

Primary Phone: _____ Secondary Phone: _____

Cell Phone: _____ Fax: _____

Email: _____

Address Information

Mailing Address _____
Street City State Zip

Physical Address _____
Street City State Zip

Principal / Owner

Name: _____ Title: _____

Date of Birth: _____ Driver License Number: _____ State of Issue: _____

Name: _____ Title: _____

Date of Birth: _____ Driver License Number: _____ State of Issue: _____

Name: _____ Title: _____

Date of Birth: _____ Driver License Number: _____ State of Issue: _____

Name: _____ Title: _____

Date of Birth: _____ Driver License Number: _____ State of Issue: _____

Name: _____ Title: _____

Date of Birth: _____ Driver License Number: _____ State of Issue: _____