



**CHARTER-PARTY CARRIER AUTHORITY
DRIVER STATEMENT OF APPLICANT**

CARRIER INFORMATION				
PSG/TCP	CARRIER NAME	FICTITIOUS BUSINESS NAME / DBA (IF ANY)		
BUSINESS ADDRESS	CITY	STATE	ZIP	PHONE
EMAIL ADDRESS				DMV REQUESTOR CODE

Applicant proposes to employ the following drivers (including applicant if applicable), providing each driver is eligible for a driving certificate. This statement must be a complete list of all drivers employed by your company.

CALIFORNIA DRIVER LICENSE NO.	BIRTH DATE MM/DD/YY	NAME OF DRIVER <i>(as appears on driver license)</i>	% OF OWNERSHIP MEMBER/OFFICER	FOR CPUC USE ONLY	
				LICENSE CLASS	STATUS

CONTINUE ON NEXT PAGE IF NECESSARY

Date: _____

Print Name of Applicant(s)

Signature of Applicant(s)

