LOUISIANA DEPARTMENT OF PUBLIC SAFETY AND CORRECTIONS
OFFICE OF MOTOR VEHICLES
INTERNATIONAL REGISTRATION PLAN
P.O. BOX 64848, BATON ROUGE, LA 70896-4848
225.925.7022 / irpdocuments@la.gov

IRP REGISTRATION CERTIFICATION

This form must be completed prior to IRP Registration. Please check box Y for yes or N for no.

1. Does the Louisiana address have a physical structure owned, leased or rented by the fleet registrant?
   Y ☐ N ☐
2. Is this location open during normal business hours? (M-F/8a.m. to 5p.m.) Y ☐ N ☐
3. Is there a person or persons conducting the fleet registrant's business in the location during normal business hours? Y ☐ N ☐
4. Are the operational records of the fleet located at this location? Y ☐ N ☐
5. If no, can the operational records be made available at the Louisiana location in the event of an audit?
   Y ☐ N ☐
   *If no, the registrant must pay all costs of travel and per diem expenses in accordance with the IRP Agreement, Section 1602.

New Account Certification

I/we, the undersigned, do hereby certify, under penalty of perjury, that the statements made herein are true and correct to the best of my/our knowledge, information and belief. I/we understand that in the event that the established place of business is proven to be outside the State of Louisiana, the registrant will be suspended and the registration and document fees will not be refunded.

_____

Name of Registrant Account #

_____

Signature of Registrant or Authorized Representative Date

Application Certification

The undersigned does hereby certify, under penalty of perjury, that the information contained on the following Schedule A, B and/or E, to be true and correct to the best of my/our knowledge, and that liability security required by law will be maintained on all vehicles listed on this application.

_____

Name of Registrant Account #

_____

Signature of Registrant or Authorized Representative Date

DPSMV1704 (R0918)