



APPLICATION INSTRUCTIONS

- IMPORTANT NOTICE: E-mail address of the motor carrier must be provided. Failure to provide an E-mail address may result in the motor carrier not receiving important correspondence, including the issued credentials, from the Commission.**
- The Application for Public Certificate form, or photocopies of this form, must be used.
- A non-refundable application fee must accompany this application. Make checks payable to Illinois Commerce Commission/TRF.
Fee Schedule:
\$50.00 Initial Application
\$50.00 Reinstatement of Revoked PCC
\$50.00 Reinstatement of PCC after temporary suspension expired
No Fee Reinstatement of PCC during temporary suspension period
- Submit the fully completed application and check or money order via US Mail to the following address. **Please note that FAXED, EMAILED OR OVER-THE-PHONE APPLICATIONS ARE NOT ACCEPTED.** If you attempt to submit the application with payment via fax, email or telephone, the application will NOT be processed.
Illinois Commerce Commission
ATTN: Processing and Information
527 East Capitol Avenue
Springfield, Illinois 62701
- All parts of this application must be completed. Failure to complete any portion in full and accurately will result in the application not being processed and the motor carrier receiving a deficiency notice.**

PART 1. IDENTITY OF APPLICANT

- Identify the type of business entity; check only one Box. For corporations provide state of incorporation and for LLCs provide state of organization.
- For corporations, LLCs, LPs, LLPs and LLLPs, the legal name must be entered exactly as it is registered with the Illinois Secretary of State. For general partnerships, the legal name must be entered exactly as it appears on the written partnership agreement.
- For sole proprietor or general partnership, the trade name, if any, must be entered exactly as it is registered with the County Clerk's office responsible for regulating trade or business names in your locality. A certificate of publication under the Assumed Business Name Act must be submitted with the application and may be obtained from the County Clerk in the county in which the business is conducted. For corporations, LLCs, LPs and LLLPs the trade name, if any, must be entered exactly as it is registered with the Illinois Secretary of State.
- Federal Employee Identification Number (FEIN): Corporations, LLCs and partnerships must provide their FEIN. Sole proprietors must provide their Social Security Number (SSN).
- Business address is the actual physical location from which the motor carrier conducts business. Do not use a P.O. Box number.
- The ILCC Number is the number issued to the motor carrier by the Illinois Commerce Commission. DO NOT LIST USDOT Numbers or MC Numbers issued by the federal agency, Federal Motor Carrier Safety Administration (FMCSA), in the ILCC Number field. If the Applicant is applying for the PCC for the first time, the ILCC Number field may be left blank.

PART 2. INSURANCE

- The Applicant must mark "YES" or "NO" for each statement.

PART 3. INTERSTATE OPERATIONS

- USDOT Numbers are issued by the federal agency, Federal Motor Carrier Safety Administration (FMCSA). If the Applicant holds a USDOT Number, the Applicant must list it in the USDOT Number field.

PART 4. VERIFICATION

- The application must be signed by the sole proprietor, partner, corporate officer, member or an authorized employee of the Applicant on behalf of the Applicant. If an individual other than the above identified persons has signed this application, proof of signatory authority for that individual must be submitted at the time of filing.

REQUIRED DOCUMENTS CHECKLIST

- Application for Public Carrier Certificate
- Form E - Proof of Liability and Property Damage Insurance to be filed by insurance company authorized to provide insurance in the State of Illinois
- Form H (Proof of Cargo Insurance) or Cargo Insurance Waiver Affidavit
Form H must be filed by insurance company authorized to provide insurance in the State of Illinois
Cargo Insurance Waiver Affidavit may be filed by the Applicant
- Intrastate Cab Card Order Form – only required of motor carriers transporting commodities solely in intrastate commerce within the State of Illinois. Motor carriers who also transport commodities in interstate commerce, and as a result have a USDOT Number, must obtain UCR (Unified Carrier Registration), and thus are not required to purchase intrastate cab cards.
- Certificate of publication under the Assumed Business Name Act from County Clerk in the county in which the business is conducted (only for sole proprietors and general partnerships operating under a trade name)



Application for Public Carrier Certificate

Type of Application (check one):	Initial Application	Reinstatement of PCC during temporary suspension period
	Reinstatement of revoked PCC	Reinstatement of PCC after temporary suspension expired

PART 1. IDENTITY OF APPLICANT

Business Type (check one):			
Sole Proprietorship	Partnership	Corporation	LLC
State of Incorporation:		State of Organization:	
Full Legal Name of the Motor Carrier:		FEIN/SSN:	ILCC Number:
Trade Name:		Phone Number:	
Business Address:		E-mail:	
City:	State:	Zip Code:	Country:
Mailing Address (if different from Business Address):			
City:	State:	Zip Code:	Country:

PART 2A. INSURANCE – Liability and Property Damage

INSTRUCTIONS

The Applicant must mark "YES" or "NO" for the below listed statements and obtain the proper amount of insurance.

Motor carrier will use freight vehicles with gross vehicle weight rating over 10,000 pounds (GVWR).
 NO YES
 If you answered NO complete Section 1 below fully. If you answered YES complete Section 2 below fully.

Section 1			Section 2		
Type of commodities transported		Insurance Required	Type of commodities transported		Insurance Required
NO YES	Any quantity of Class A or B explosives; any quantity of poison gas (Poison A); or highway route controlled quantity radioactive materials as defined in 49 C.F.R. § 173.455.	\$5,000,000	NO YES Category A	Property (non-hazardous)	\$750,000
NO YES	<u>Commodities other than</u> any quantity of Class A or B explosives; any quantity of poison gas (Poison A); or highway route controlled quantity radioactive materials as defined in 49 C.F.R. § 173.455.	\$300,000	NO YES Category B	Hazardous substances as defined in 49 C.F.R. § 171.8, transported in cargo tanks, portable tanks, or hopper-type vehicles with capacities in excess of 3,500 water gallons, or in bulk Class A or B explosives, poison gas (Poison A) liquefied compressed gas or compressed gas, or highway route controlled quantity radioactive materials as defined in 49 C.F.R. § 173.455.	\$5,000,000
			NO YES Category C	Oil listed in 49 C.F.R. § 172.101, hazardous waste, hazardous materials and hazardous substances defined in 49 C.F.R. § 171.8 and listed in 49 C.F.R. § 172.101, but not mentioned in category B above or D below.	\$1,000,000
			NO YES Category D	Any quantity of Class A or B explosives, any quantity of poison gas (Poison A) or highway route controlled quantity radioactive materials as defined in 49 C.F.R. § 173.455.	\$5,000,000

Application for Public Carrier Certificate



PART 2B. INSURANCE – Cargo

INSTRUCTIONS

The Applicant must mark "YES" or "NO" for each of the below listed statements.

NO YES

1. The motor carrier does and will transport in any vehicle cargo with a value greater than \$5,000 or perform a for-hire drive-away movement of a vehicle with a value greater than \$5,000
2. The motor carrier will request from the Commission a waiver of the cargo insurance requirement listed below by completing and filing with the Commission the Cargo Insurance Waiver Affidavit. **(The applicant may only mark "yes" to this question if "no" was marked to Question 1 above)**

If **YES** was marked to Question 1, then the motor carrier must mark "yes" or "no" for the each of the below listed statements and obtain the proper amount of cargo insurance.

Type of commodities transported		Insurance Required	
NO YES	Unprocessed agricultural commodities, milk in bulk, commodities in dump-type vehicles or ordinary livestock carried on each vehicle at any one time	\$5,000	
NO YES	<u>Commodities other than</u> unprocessed agricultural commodities, milk in bulk, commodities in dump-type vehicles or ordinary livestock carried on each vehicle at any one time	\$5,000 for loss or damage to cargo carried on any one motor vehicle	\$10,000 for loss or damage to cargo or aggregate loss or damage to cargo occurring at any one time

PART 3. INTERSTATE OPERATIONS

The Applicant must indicate by marking "YES" or "NO" whether the Applicant holds the following:

NO YES

USDOT Number issued by FMCSA. If yes, list the USDOT No.: _____
 Unified Carrier Registration (UCR) for the current year.

PART 4: VERIFICATION

I, the undersigned, under penalty for false statement, certify that the above information is true and accurate and that I am authorized to execute and file this document on behalf of the Applicant. By signing this application, the Applicant consents to service by electronic means of any correspondence pertaining to this certificate.

Print Name:	Authorized signature:	Position/Title:	Date:
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ILCC OFFICE USE ONLY

Date Application Received: