Agent Listing for Household Goods Carrier Alternative Registration

Texas Department of Motor Vehicles, Motor Carrier Division, P.O. Box 12984, Austin Texas 78711-2984
800-299-1700 Fax: (512) 465-4284 *(Do not send original if faxed)*

Certificate Number _____

_____
Name of Motor Carrier

_____
Street Address

_____
City, County, State, and Zip

The department must have 30 days notice to appoint or terminate any agreement

Please provide agent's certificate and name below:

Agent's Certificate Number	Agent's Name	Date Appointed	Date Terminated
1.			
2.			
3.			
4.			
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20.			

If additional space is needed, please make a copy of this page.

_____
Signature

_____
Printed/typed name

_____
Title

The Texas Department of Motor Vehicles maintains the information collected through this form. With few exceptions, you are entitled upon request to be informed about the information that we collect about you. Under §§552.021, 552.023 and 559.004 of the Texas Government Code, you are entitled to receive and review the information, and to have us correct erroneous information.

For more information about Agent Listing for Household Goods Carrier Alternative Registration, visit our website at www.TxDMV.gov. For comments concerning the application process call 800-299-1700 or email MCD-Respond@TxDMV.gov.