



TEXAS APPORTIONED ACCOUNT INFORMATION

SAN ANTONIO REGIONAL SERVICE CENTER

LOCATION: 15150 NACOGDOCHES RD. SUITE 100 SAN ANTONIO, TEXAS 78247

OPERATIONAL HOURS: 8AM- 3:30PM

DIRECT IRP PHONE: 210-731-2132

E-MAIL: SA-VTRMailbox@txdmv.gov

FAX: 210-731-2135

WEBSITE: www.TxDmv.gov/motor-carriers

NOTES:

- ✓ New apportioned accounts can take anywhere from +1 hour(s)
- ✓ Because of the processing time for accounts, it is **STRONGLY** recommended that if you are needing in-person service, please visit our office prior to 3:30pm or submit all required documents for approval via fax, email, or drop-off prior to your in-office visit. The cut-off time for apportioned check-in's are non-negotiable and all accounts will be serviced by the order in which they are received
- ✓ All apportioned documents may be submitted via fax, mail-in, or email prior to the finalization of the account *including new accounts, renewals, and supplements*. It should be noted that electronically submitted documents will be processed in the order in which they are received.
- ✓ When requesting a refund or an equipment exchange **ALL** plate(s), cab card(s), and equipment list Schedule A's must be submitted prior to refund consideration
- ✓ Please remember all apportioned accounts have a 72- hour turnaround time
- ✓ Forms of payment collected for new accounts will need to be **CERTIFIED FUNDS** only (cash, cashier's check, or money order)
- ✓ We are happy to assist you in any way that we can, but if you would like to obtain more information regarding your account- you are welcome to visit our online website to view our TxIRP Manual for reference.





Texas Department of Motor Vehicles

Texas IRP Apportioned Registration New Applicant Checklist for Section 305 Applications

In accordance with the International Registration Plan, Section 305, Selection of Base Jurisdiction, the Texas Department of Motor Vehicles verifies residence or established place of business for applicants selecting Texas as their base jurisdiction. Virtual office locations are prohibited.

Answer the following questions to determine the account type:

- Yes No 1.) Is the applicant an Individual?
- Yes No 2.) Is the applicant a Business?
- Yes No 3.) Does the principal business owner have a form of Texas Identification issued to them?

If "No" is the answer to #3, Established Place of Business Requirements must be met.

Applicants, as Individuals, must have a permanent Texas ID to open a TxIRP account.

Business owners with an out-of-state ID, must show they have an Established Place of Business in Texas.

OFFICIAL USE ONLY

Type of Identification: _____ Issuing Authority: _____ Verified By: _____

- Individual** - Submit items 2 and 3 below.
- Business** - Submit items 1, 2, and 3 below.

Qualifying Documentation

All submitted documents must have the same physical address. Virtual office locations are prohibited.

1. Sole Proprietor, Limited Liability Company, Corporation, Limited Partnership, etc., must provide:

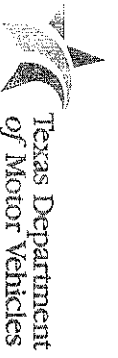
- Proof of corporation or registered to conduct business in Texas
- Texas Secretary of State corporation filing or Assumed Name Certificate as filed with County Clerk (must outline the business ownership)

2. All applicants must submit the following items:

- Property deed (Mortgage Statement) or lease/rental agreement for physical location address
- Texas Identification of the applicant or principal owner of the business (drivers license, passport, state ID, etc.). Business owners with an out-of-state ID must prove Established Place of Business requirements are met prior to applying

3. All applicants must submit at least two of the following:

- | | |
|--|---|
| <input type="checkbox"/> Federal Tax Return | <input type="checkbox"/> FEIN Letter |
| <input type="checkbox"/> Texas Voter Registration | <input type="checkbox"/> Correspondence from IRS or TX Attorney General |
| <input type="checkbox"/> Utility Bill in applicant name with service address | <input type="checkbox"/> Correspondence from US Dpt of Veterans Affairs |
| <input type="checkbox"/> Texas Vehicle Title in applicant name | <input type="checkbox"/> Payroll Stub |
| <input type="checkbox"/> County Appraisal District Summary | <input type="checkbox"/> Property Tax Receipt |
| <input type="checkbox"/> Texas Franchise Tax Receipt | <input type="checkbox"/> Other Documentation approved by Department |



Texas IRP Apportioned Registration Application

(Reg. Year) _____
 Account Number _____ Fleet Number _____ Supplement _____
 Section 305 Application

OFFICIAL USE ONLY	
HVUT: _____	Tx ID: _____
Ins: _____	TTL Date: _____
UCR: _____	Leaser: _____

Account Name	DBA	Contact Person	Account Expiration
Physical Texas Address	County of Residence	Mailing Address	Phone No.
City, State and Zip Code	Region	City, State and Zip Code	Fax No.
		Email Address	Secondary Phone No.
			US DOT #
			TxDMV#

VEHICLE INFORMATION LIST

Unit #	Year	Make	Plate #	Axles	Total Axles	Unladen Wgt.	Type +	Fuel ++	Gross Wgt.	Purchase Price	Factory Price	Purchase Price	Purchase Date
VIN _____ *1 Colorado Trailer Document ### <input type="checkbox"/> Yes <input type="checkbox"/> No Replace Plate <input type="checkbox"/> Yes <input type="checkbox"/> No *2 CRFS USDOT _____ *3 CRFS TAX ID _____ *4 Y/N _____ <input type="checkbox"/> Yes <input type="checkbox"/> No * Special _____													
Owner Name _____ VIN _____ *1 Colorado Trailer Document ### <input type="checkbox"/> Yes <input type="checkbox"/> No Replace Plate <input type="checkbox"/> Yes <input type="checkbox"/> No *2 CRFS USDOT _____ *3 CRFS TAX ID _____ *4 Y/N _____ <input type="checkbox"/> Yes <input type="checkbox"/> No * Special _____													
Owner Name _____ VIN _____ *1 Colorado Trailer Document ### <input type="checkbox"/> Yes <input type="checkbox"/> No Replace Plate <input type="checkbox"/> Yes <input type="checkbox"/> No *2 CRFS USDOT _____ *3 CRFS TAX ID _____ *4 Y/N _____ <input type="checkbox"/> Yes <input type="checkbox"/> No * Special _____													

+Type = **BS** (bus), **TK** (truck only), **TT** (truck-tractor), ++ **Fuel = Diesel, Gas, Propane**
 *1 - Colorado Trailer: If unit is Type TK (truck) with travel in Colorado, indicate either "yes" or "no" if the truck pulls a trailer in Colorado.
 *2 - CRFS USDOT: Enter USDOT # for the Carrier Responsible for the Safety (CRFS) fitness of the vehicle.
 *3 - CRFS TAX ID: Enter Tax ID # for the CRFS.
 *4 - Y/N: Indicate if the CRFS of the vehicle is expected to change during this registration year.
 *5 - Special Use: Indicate non-standard uses (i.e., carnival, dump truck, farm truck, logging, wrecker, pump/drill/crane, household goods, less than 10K miles)
 ** If Document # is not shown - Carrier must furnish proof of Texas title or Texas Registration Purposes Only receipt in order to register vehicle.

Total Units Added _____ Total Units Deleted _____

Unit #	Year	Make	Plate #	VIN	Gross Wgt.	Date Removed from Fleet	Reason	Credentials Surrendered



(Reg. Year)

Texas IRP Apportioned Registration Application

Schedule B

Account Number _____ Fleet Number _____

Account Name	DBA	Contact Person	Account Expiration
Physical Texas Address	County of Residence	Mailing Address	Tax ID (FEIN or SSN)
City, State and Zip Code	Region	City, State and Zip Code	US DOT #
		Phone No.	TX MCR#
		Email Address	
		Fax No.	
		Secondary Phone No.	

Schedule B Ownership Type (check one): Company Limited Partnership For Hire Rental or Leasing Co.
 Sole Proprietor Limited Liability Co. Private Carrier Hazardous Materials Carrier *

List distance traveled in each jurisdiction in which this fleet traveled for the period of **July 1, 2022, through June 30, 2023.**

Jurisdiction	Distance
Alabama	
Arkansas	
Arizona	
California	
Colorado	
Connecticut	
District of Columbia	
Delaware	
Florida	
Georgia	
Iowa	
Idaho	
Illinois	
Indiana	
Kansas	
Kentucky	
Louisiana	

Jurisdiction	Distance
Massachusetts	
Maryland	
Maine	
Michigan	
Minnesota	
Missouri	
Mississippi	
Montana	
North Carolina	
North Dakota	
Nebraska	
New Hampshire	
New Jersey	
New Mexico	
Nevada	
New York	

Jurisdiction	Distance
Ohio	
Oklahoma	
Oregon	
Pennsylvania	
Rhode Island	
South Carolina	
South Dakota	
Tennessee	
Texas	
Utah	
Virginia	
Vermont	
Washington	
Wisconsin	
West Virginia	
Wyoming	

Jurisdiction	Distance
Alberta	
British Columbia	
Manitoba	
New Brunswick	
Newfoundland/Labrador	
Nova Scotia	
Ontario	
Prince Edward Island	
Quebec	
Saskatchewan	

Total Fleet Distance

Certify that the actual distances traveled shown on this application includes all interstate and intrastate mileage and also includes all mileage operated under trip lease to another carrier.
 *If the box indicating Hazardous Materials Carrier has been checked, the undersigned is declaring knowledge of the Application Provisions of any State Motor Carrier Safety Regulations or Hazardous Materials Regulations.
 I attest that all vehicles are insured while operated upon public roads, as required by law. Proof of financial responsibility will be carried in each vehicle. This certifies that the applicable highway usage taxes have been paid on the _____ power units listed on the attached equipment list. Knowingly providing false information on an application filed with the department subjects you to a third-degree felony under State Law. The undersigned under oath swears under penalty of perjury that the above statements including all information on this application are true and correct.

Signature _____ Title _____ Date _____



Texas Department
of Motor Vehicles

Texas IRP Acceptable Distance Records for Audit

SIGN AND MAIL COMPLETED FORM TO:

TxDMV - Motor Carrier Division

P.O. Box 26440

Austin, TX 78755-0440

Under the provisions of Article X of the International Registration Plan (IRP), Texas Department of Motor Vehicles (TxDMV) is required to audit three (3) percent of the number of fleets whose registration it renews annually. A registrant must maintain adequate records to enable TxDMV to verify the distances reported on the registrant's apportioned application and to evaluate the accuracy of the registrant's distance accounting system for its fleet.

A registrant must retain all records in support of an apportioned application for a period of three (3) years following the close of the registration year to which the apportioned application pertains. These records must be maintained for each vehicle apportioned during the reporting period of July 1 – June 30.

A registrant must operate each apportioned vehicle interstate during a reporting/registration period. If an apportioned vehicle did not operate interstate during a reporting/registration period, the registrant shall submit a letter of explanation with the apportioned application to TxDMV.

Records containing the following elements shall be deemed adequate for audit:

1) For records produced by a means other than a vehicle-tracking system:

- | | |
|---|---|
| a) the beginning and ending dates of the trip to which the Records pertain | e) the total distance of the trip |
| b) the origin and destination of the trip | f) the distance traveled in each jurisdiction |
| c) the route of travel | g) the vehicle identification number or vehicle unit number |
| d) the beginning and ending reading from the odometer, hubodometer, Engine Control Module (ECM), or any similar device for the trip | |

2) For records produced wholly or partly by a vehicle-tracking system, including a system based on a Global Positioning System (GPS):

- | | |
|--|---|
| a) the original GPS or other location data for the vehicle to which the records pertain | e) the calculated distance between each GPS or other system reading |
| b) the date and time of each GPS or other system reading | f) the route of the vehicle's travel |
| c) the location of each GPS or other system reading | g) the total distance traveled by the vehicle |
| d) the beginning and ending reading from the odometer, hubodometer, ECM, or any similar device for the period to which the records pertain | h) the distance traveled in each jurisdiction |
| | i) the vehicle identification number or vehicle unit number |

3) Summaries:

- a summary of the fleet's operations for each month, which includes both the full distance traveled by each apportioned vehicle in the fleet during the calendar month, and the distance traveled in the month by each apportioned vehicle in each jurisdiction
- a summary of the fleet's operations for each calendar quarter, which includes both the full distance traveled by vehicles in the fleet during the calendar quarter, and the distance traveled in each jurisdiction by the vehicles in the fleet during the calendar quarter
- a summary of the quarterly summaries

In recording the actual distance of a vehicle, the driver must record all trip movement (every mile/kilometer driven interstate and intrastate), including loaded, empty, deadhead, bobtail, off-road, permitted and/or personal miles/kilometers. All odometer readings must be consecutive.

I have read the above and understand that failure to maintain records for my apportioned fleet as required could result in the cancellation of my apportioned privileges. These records will be made available for audit by TxDMV upon request during normal business hours. I further understand that I must keep my mailing address and phone number current with the TxDMV and that my failure to respond to an audit request mailed to my address of record by the stated deadline will result in a 20/50/100 percent fee assessment of the apportionable fees paid for the registration period to which the records pertain.

Applicant Information				
Name of Registrant			TxIRP Account Number	
Work Phone Number		Cell Phone Number		Email Address
Mailing Address		City	State	Zip
Signature of Registrant/Agent				Date

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

For more information on Acceptable Distance Records, visit our website at www.TxDMV.gov. For comments concerning the audit process call 888/368-4688 or email MCD_Response@TxDMV.gov.



Texas Department of Motor Vehicles

Texas IRP Cab Card Weight Schedule

(Reg Year)

Type of Transaction: Original Renewal Supplement

Account Name

Account Number

Fleet Number

Supplement Number

The following schedule should be completed by all Texas based carriers and should indicate the weight you wish to prorate in that jurisdiction. Vehicles must be listed in the same unit order as on the original application or supplemental application. If this form is completed in conjunction with an apportioned registration renewal application, you need only complete this form if you are making changes to the registered weights of vehicles already in the fleet.

List the total combined Gross Weight of the power vehicles or combination of vehicles (Power Units Only).

Jurisdiction	UNIT No.	UNIT No.	UNIT No.	UNIT No.	UNIT No.
AL					
AR					
AZ					
CA					
CO					
CT					
DC					
DE					
FL					
GA					
IA					
ID					
IL					
IN					
KS					
KY					
LA					
MA					
MD					
ME					
MI					
MN					
MO					
MS					
MT					
NC					
ND					
NE					
NH					
NJ					

Jurisdiction	UNIT No.	UNIT No.	UNIT No.	UNIT No.	UNIT No.
NM					
NV					
NY					
OH					
OK					
OR					
PA					
RI					
SC					
SD					
TN					
TX					
UT					
VA					
VT					
WA					
WI					
WV					
WY					

CANADIAN PROVINCES

AB					
BC					
MB					
NB					
NL					
NS					
ON					
PE					
QC					
SK					

Please print or type using black ink for reproduction purposes.



Texas IRP Online Access Application

Registrant: To obtain a TxIRP username and password, submit this application along with a copy of your drivers license to your TxDMV Regional Service Center (RSC) using the email or fax chart at the bottom of the page or to the Motor Carrier Division by email MCD_TxIRP@TxDMV.gov or fax 512-465-4273 (complete sections I, II & IV).

Licensing Agents/Permit Service: To obtain TxIRP account access, submit this application, with power of attorney, to your local RSC (complete sections I, II & IV).

To delete an existing user, complete Sections I, III, & IV.

Section I: Registrant Texas IRP Account Information

Registrant Name		Account Number	
Street Address			
City	State	Zip Code	Regional Service Center
Phone Number	Extension	Fax Number	
Email Address	Authorized First Name	Authorized Last Name	

Section II: Type of User Account Registrant Licensing Agent

User First Name	User Last Name		
Street Address			
City	State	Zip Code	Regional Service Center
Phone Number	Extension	Fax Number	
Email Address	User Name Requested		

Section III: Delete User Name (Complete if you are requesting to remove an existing user)

User Name	Email Address
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Section IV: Authority Statement

By my signature, I am authorizing the Texas Department of Motor Vehicles permission to provide the agent indicated above access to apportioned account #: _____ using the TxIRP online registration system.

_____	_____	_____
Printed Name of Registrant/Authorized Agent	Signature of Registrant/Authorized Agent	Date

Regional Service Centers (RSCs) Fax Numbers and Email Addresses

Abilene: (325) 674-1003 or ABL-IRP@TXDMV.GOV	Houston: (713) 866-7301/7302 or HOU_IRP@TXDMV.GOV
Amarillo: (806) 356-3311 or AMA_IRP@TXDMV.GOV	Longview: (903) 237-2804/2805 or LVW-VTRIRP@TXDMV.GOV
Austin: (512) 837-7703 or AUSIRP@TXDMV.GOV	Lubbock: (806) 748-2903 or LBB_VTR@TXDMV.GOV
Beaumont: (409) 895-3205 or BMT-IRP@TXDMV.GOV	Midland-Odessa: (432) 276-4403 or ODA_VTR@TXDMV.GOV
Corpus Christi: (361) 808-2610 or CRP_DMVMAIL@TXDMV.GOV	Pharr: (956) 702-3718 or PHR-IRP@TXDMV.GOV
Dallas: (972) 416-4296 or DAL-VTR-IRP@TXDMV.GOV	San Antonio: (210) 731-2134/2135 or SA-VTRMAILBOX@TXDMV.GOV
El Paso: (915) 594-6003 or ELP_VTR@TXDMV.GOV	Waco: (254) 296-2735 or WAC_VTR@TXDMV.GOV
Fort Worth: (817) 285-1550 or FTW_VTRPUBLIC@TXDMV.GOV	Wichita Falls: (940) 235-4850 or WFSVTROFFICE@TXDMV.GOV

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. You may also review and correct the information collected. To make an open records request, email OGCOPENRECORDS@TXDMV.gov.



Texas IRP Average Distance Chart 2022 & 2023

Based on Application Effective Date

If actual distances are not accrued during the reporting period, average distance must be listed for all jurisdictions.

Jurisdiction	Abbreviation	2022 Jurisdiction Distance	2023 Jurisdiction Distance
Alberta	AB	121	122
Alabama	AL	2,205	2,085
Arkansas	AR	2,800	2,738
Arizona	AZ	2,213	2,166
British Columbia	BC	49	51
California	CA	2,586	2,238
Colorado	CO	1,232	1,058
Connecticut	CT	305	229
District of Columbia	DC	16	7
Delaware	DE	75	52
Florida	FL	1,786	1,738
Georgia	GA	1,727	1,696
Iowa	IA	514	579
Idaho	ID	313	277
Illinois	IL	2,012	2,074
Indiana	IN	1,291	1,318
Kansas	KS	950	969
Kentucky	KY	1,009	957
Louisiana	LA	3,469	3,144
Massachusetts	MA	237	221
Manitoba	MB	3	44
Maryland	MD	431	342
Maine	ME	76	121
Michigan	MI	466	528
Minnesota	MN	256	332
Missouri	MO	1,612	1,734
Mississippi	MS	1,442	1,397
Montana	MT	217	180
New Brunswick	NB	2	41
North Carolina	NC	908	900
North Dakota	ND	335	199
Nebraska	NE	414	417
New Hampshire	NH	68	52
New Jersey	NJ	522	392
Newfoundland/Labrador	NL	17	16
New Mexico	NM	2,614	2,322
Nova Scotia	NS	9	49
Nevada	NV	373	332
New York	NY	783	594
Ohio	OH	1,416	1,409
Oklahoma	OK	2,630	2,473
Ontario	ON	79	151
Oregon	OR	427	349
Pennsylvania	PA	1,441	1,298
Prince Edward Island	PE	5	28
Quebec	QC	20	77
Rhode Island	RI	50	48
South Carolina	SC	792	745
South Dakota	SD	201	158
Saskatchewan	SK	23	44
Tennessee	TN	2,367	2,311
Texas	TX	30,633	27,566
Utah	UT	624	564
Virginia	VA	1,632	1,481
Vermont	VT	59	40
Washington	WA	340	287
Wisconsin	WI	361	415
West Virginia	WV	545	233
Wyoming	WY	517	403
Total		79,421	73,841