



621 Woodland Square Loop SE
Lacey, WA 98503
P.O. Box 47250
Olympia, WA 98504-7250
Phone: 360-664-1222
E-mail: transportation@utc.wa.gov

Common Carrier Broker Registration

Under the provisions of RCW [81.80](#) and WAC [480-12](#), each intrastate or interstate Common Carrier Broker must register with the Washington Utilities and Transportation Commission (UTC) and file a surety bond in the amount of ten thousand dollars conditioned upon the broker making compensation to shippers, consignees, and carriers for all moneys belonging to them and coming into the broker's possession in connection with such transportation services.

INCOMPLETE OR INCORRECT APPLICATIONS MAY DELAY YOUR REGISTRATION. Be sure to include the \$25.00 application fee, a copy of your broker bond, and any other required attachments when you file your application for registration. Submit your application by:

Upload your application to efileapp.utc.wa.gov and pay online at payments.utc.wa.gov, or,
Mail your application **with** your check or money order to the following address:
UTC, PO Box 47250, Olympia, WA 98504-7250

ACH online (no service fee) or credit card online at payments.utc.wa.gov (2.5% or minimum of \$3.95 is charged by Official Payments for credit card processing).

DO NOT EMAIL YOUR CREDIT CARD INFORMATION

INSTRUCTIONS:

TYPE OF OPERATION: Check the types of operations you plan to conduct in the state of Washington. Be sure to check all boxes that apply. If you are registering as a broker under authority granted to you by the FMCSA you must include a copy of that authority and bond with your registration. **One company may not be both a broker and a freight forwarder.**

APPLICANT NAME: Legal name must be an individual, partnership, or corporation. The name on the bond and the name on the registration must match exactly. In the case of a corporation, the name must also agree exactly with how the company is registered with the Secretary of State's office.

TRADE NAME: You may list a trade or business name, if different than the legal name of the applicant.

MAILING ADDRESS: Provide your complete mailing address, including city, state, and postal zip code.

PHYSICAL ADDRESS: Provide a physical address, only if it is different than your mailing address.

TELEPHONE & FAX NUMBERS: Be sure to provide your current number(s) including area code.

EMAIL ADDRESS: Complete.

USDOT NUMBER: Complete if interstate.

TYPE OF BUSINESS STRUCTURE: If Partnership, Corporation, or Limited Liability Company, please list the partners, members or corporate members with their percentages of ownership.

If you currently hold or have previously held a permit or registration with the UTC, please indicate the number.

SIGN AND DATE

If you are registering operations as a FMCSA authorized broker, indicate your operating authority number. Remember to include a copy of your bond and operating authority with this application.

INSURANCE REQUIREMENTS: The applicant must file a Surety Bond in the amount of \$10,000 or if they are registering as a FMCSA regulated broker, applicant may attach a copy of the FMCSA bond and operating authority. **THE BUSINESS NAME ON THE BOND MUST MATCH THE APPLICANT NAME EXACTLY.**



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Common Carrier Broker Registration - Application
Application Fee: \$25.00

FOR OFFICAL USE ONLY			
Date Filed:	Company:		
Receipt ID:	Payment ID:	Amount Paid:	
111-0268-200-02	111-0268-032-05		

TYPE OF OPERATION (One person cannot be both a broker and a freight forwarder):

(Check all that apply) Forwarder Broker (Intrastate) Broker (Interstate FMCSA)

BOND IN THE AMOUNT OF \$10,000 MUST ACCOMPANY THIS REGISTRATION APPLICATION or if you are registering as a FMCSA regulated broker, attach a copy of your FMCSA registered bond and operating authority.

Applicant Name:

Trade Name (if any):

Mailing Address:

Physical Address (if different than mailing address):

Phone Number:

Fax Number:

E-mail:

UBI Number:

State of Incorporation:

US DOT number:

Type of Business Structure:

Individual

Partnership

Corporation (LP, LLP, LLC)

Name

Title

Stock Distribution or Percentage of Share

Have you held a permit or certificate from this Commission? No Yes If yes, permit no:

Have you or your company ever been cited for business-related violations of state law or commission rule or any other federal or state agency? No Yes

If yes, please explain:

CERTIFICATION

I, as applicant, understand that the filing of this application does not in itself constitute authority to operate and that no operations may be conducted until a permit is issued by the UTC. I hereby declare and affirm that the information contained in this application is true to the best of my knowledge and belief.

Applicant Name

Date