



NEW MEXICO PUBLIC REGULATION COMMISSION

APPLICATION FOR A CERTIFICATE OR PERMIT

NOTICE: This packet contains the materials you will need to apply for a Certificate or Permit as a common motor carrier or an amendment to a Certificate or Permit from the New Mexico Public Regulation Commission.

READ IT CAREFULLY! Follow the instructions carefully. Use the enclosed checklist to be sure your application is complete and correct. **ANY APPLICATION THAT IS NOT COMPLETE OR THAT CONTAINS STAPLES, PAPER CLIPS OR BINDINGS OF ANY KIND WILL BE RETURNED.** For a copy of the PRC's Motor Transportation Rules, visit the Transportation Division's website at:

www.nmprc.state.nm.us/transportation/index.html.

WARNING: pursuant to NMSA 1978, §65-2A-33, willfully making a false statement of material fact in this application is a felony, punishable by imprisonment of not more than five years.

**NEW MEXICO PUBLIC REGULATION COMMISSION
TRANSPORTATION DIVISION
1120 PASEO DE PERALTA
P.O. BOX 1269
SANTA FE, NEW MEXICO 87504-1269**

THIS PACKET IS TO PREPARE AN APPLICATION FOR:

1. **CERTIFICATE** A Certificate to operate as an intrastate common motor carrier of persons or property. Pursuant to House Bill 194, which took effect on July 1, 2013, the PRC now issues five types of certificates:
 - i) Ambulance Service
2. **PERMIT** A Permit to operate as an intrastate contract motor carrier of persons or property.
3. **AMENDMENT OF A CERTIFICATE** If you need to amend or add authority to an existing Certificate or Permit.
4. **LEASE OF A CERTIFICATE OR PERMIT**
5. **VOLUNTARY TRANSFER OF A CERTIFICATE OR PERMIT**

(You may only apply for one authority or amendment per application.)

FOR ASSISTANCE PREPARING THIS APPLICATION

If you have any questions regarding this application, or wish to obtain other PRC application forms or copies of the Rules of Procedure or Motor Transportation Rules, please call 505-827-4519 between 8:00 am and 5:00 pm or visit the Transportation Division online at <http://www.nmprc.state.nm.us/transportation/index.html>.

APPLICATION FORM INSTRUCTIONS

There is a **MANDATORY** pre-filing review process that must be completed before an application is officially docketed and filed. *See* 18.3.2.14 NMAC. The application may not include staples, paper clips or bindings of any kind. If the application is incomplete it will be returned with a letter informing the applicant of the deficiencies. The applicant will have twenty (20) days to submit the requested changes and return the application. If the application is still incomplete, the applicant will get a 2nd letter informing them of the deficiencies. The applicant will then have twenty (20) days to submit the requested changes and return the application. If the applicant fails to return the application within sixty (60) days from the initial application date or the director determines that the application is still incomplete, the application will be deemed abandoned and a letter will be sent to the applicant informing them that the case is closed and a new application will have to be submitted.

Once the application is complete the director will certify in writing that the application is complete. This does not constitute approval of the application. Upon receiving notice that the director has certified the application, the applicant shall file the application in accordance with 18.3.2.14.B NMAC.

INSURANCE REQUIREMENTS

PUBLIC LIABILITY AND PROPERTY DAMAGE LIABILITY (Form E): See PRC Motor Transportation Rules- 18.3.3 NMAC

UNIFORM MOTOR CARGO CERTIFICATE OF INSURANCE (Form H): See PRC Motor Transportation Rules- 18.3.3 NMAC

ANY INSURANCE COMPANY YOU CONTRACT WITH FOR COVERAGE MUST BE LICENSED TO TRANSACT BUSINESS IN THE STATE OF NEW MEXICO. YOU MAY CHECK WITH THE OFFICE OF THE SUPERINTENDENT OF INSURANCE FOR VERIFICATION THAT YOUR INSURANCE COMPANY IS AUTHORIZED TO TRANSACT BUSINESS IN THE STATE OF NEW MEXICO BY CALLING (855) 427-5674.

The application form itself begins on page 7. You must fill it out completely. If staples, paper clips or bindings of any kind are included the application will be returned to you. You must submit a cover page for each exhibit.

EXHIBIT A

(For all original certificates or permits, amendments of a certificate)

1-If applicant is a registered corporation: Submit a current Certificate of Good Standing from the Corporations Bureau of the New Mexico Secretary of State as required by 18.3.2.13A(8)(a) NMAC.

Submit names and addresses of shareholders who own 10% or more of the voting stock of the corporation as required by 18.3.2.13A(8)(b) NMAC

If other than a corporation: submit a description of the form of ownership, the names and addresses of all principal owners and managers, the percentage of ownership interest of each, and the date the business entity was created as required by 18.3.2.13A(9) NMAC.

2- A copy of the current certificate or permit if you have one.

EXHIBIT B

(For all original certificates, amendments of a certificate)

- 1- Affidavits or other evidence upon which the applicant intends to rely to show that the applicant is fit and able, as required by 18.3.2.13A11 NMAC. (Definitions for fitness and ability are provided in NMSA 1978, §65-2A-3)
- 2- Affidavits or other evidence upon which the applicant intends to rely to show that the proposed service **is** or **will** serve a useful public purpose that is responsive to a public demand or need **and** that the ambulance service that currently exists in the territory sought in the application is inadequate; and submit affidavits or other evidence of the effect that issuance of the certificate would have on existing ambulance service in the territory sought in the application. (18.3.2.13 G NMAC)

EXHIBIT C

(For all original certificates, amendments of certificate, leases, and voluntary transfers)

Submit a proposed Tariff as required by 18.3.6 NMAC and NMSA 1978, §65-2A-20 and 21.

EXHIBIT D

(For all original certificates)

- 1- A list of all vehicles to be used by the applicant, including all equipment leases filed with and approved by the commission.
- 2- For each vehicle, an annual inspection form completed by a DOT or certified inspector (18.3.4.11 F NMAC, 49 CFR 396.3) within the preceding 12 months that shows that each motor vehicle proposed to be operated by the applicant meets the safety requirements of the federal motor safety regulations.
- 3- A description of the company's daily and annual inspection routine and maintenance program.

- 4- A copy of the written preventive maintenance program as required by 18.3.2.13 B(11) NMAC. Please also supply a copy of the daily inspection form the applicant intends to use.
- 5- Applicants U.S. DOT safety rating, **if** it has one.

EXHIBIT E

(For all original certificates)

- 1- A list of drivers and driver's license information (MVD Records) for each driver including state of issuance, license number, and class of license. [18.3.2.13B(5)]
- 2- The applicants written statement certifying that all drivers meet the driver qualifications of 18.3.4 NMAC, Safety Requirements, and that the applicant will maintain driver qualification files on each driver. [18.3.2.13B(6)]
- 3- Medical cards for each driver as required by 49 CFR 391.43. Volunteer drivers of ambulance vehicles are not required to provide a medical card, but need to provide a letter from a medical examiner certifying whether or not the driver has a condition that may interfere with the safe operation of an ambulance, in accordance with Subsection C of 18.19.5.33 NMAC.

EXHIBIT F

(For all original certificates)

Proof of Financial Responsibility, refer to 18.3.3.8 – 18.3.3.10 NMAC. Your insurance company must mail original uniform filing form E, directly to the Transportation Division of the New Mexico Public Regulation Commission.

EXHIBIT G

(For all original certificates)

A copy of either a certificate of workers' compensation insurance or a certificate of exemption from the workers' compensation administration, as required by 18.3.2.13 B(9).

EXHIBIT H

(For all original certificates)

The applicant's written statement certifying that the motor carrier has developed a drug and alcohol testing program that will meet the requirements of 49 CFR Section 382 and Part 40.

EXHIBIT I

(Additional requirements for ambulance services)

Submit an operations plan in accordance with 18.3.14.10 NMAC.

EXHIBIT J

(Specific requirements for leases of certificates or permits)

- 1- A copy of the current certificate or permit.
- 2- A complete description of all operating equipment to be leased.
- 3- A statement that the proposed lease is not being made to avoid any previously incurred taxes or legal obligations, or to circumvent any otherwise applicable requirements of these rules of the Motor Carrier Act.
- 4- A copy of the proposed lease, containing provisions:

- A- Stating that the proposed lease may not go into effect until approved by the commission;
- B- Stating which party to the lease shall be responsible for complying with the qualifying provisions in 18.3.2.13 NMAC; and
- C- Specifying the term of the lease.

EXHIBIT K

(Specific requirements for voluntary transfers of certificates or permits)

- 1- A copy of the current certificate or permit.
- 2- A joint Affidavit that certifies that all accrued taxes, rents, wages of employees and all other indebtedness incident to the transferor-applicant's operations have been paid in full, or that the transferee-applicant will assume responsibility for paying them if they have not been paid in full
- 3- A complete description of all operating equipment to be transferred.
- 4- A showing that the proposed transfer is not being made to avoid any previously incurred taxes or legal obligations, or to circumvent any otherwise applicable requirements of these rules or the Motor Carrier Act.
- 5- If all taxes have been paid in full, a tax clearance certificate from the New Mexico taxation and revenue department certifying that all state tax indebtedness incident to the transferor-applicant's operations has been paid in full.

EXHIBIT L

(Specific requirement for Permits)

Submit a copy of each contract under which the applicant intends to operate.

NEW MEXICO PUBLIC REGULATION COMMISSION
TRANSPORTATION DIVISION
P.O. BOX 1269
SANTA FE, NEW MEXICO 87504-1269

APPLICATION

PRC USE

 Case No. _____ TR-M

APPLICATION FEES

<u>THIS IS AN ORIGINAL APPLICATION FOR A:</u>	<u>FEES</u>
Certificate or Permit	\$250.00
Amendment of a Certificate	\$250.00
Lease or Transfer of a Certificate	\$200.00
Voluntary Transfer	\$200.00

NOTE: DO NOT SEND ANY FEES OR DUPLICATE COPIES UNTIL INSTRUCTED TO DO SO BY TRANSPORTATION DIVISION STAFF

Corporate/LLC Name _____

All D/B/A Names _____

Street Address _____

City, State, Zip Code _____

If application for an Amendment, PRC Certificate No. _____

New Mexico CRS (Gross receipts Tax ID) No. _____

Telephone No.(_____) _____

Mailing Address (If different from above) _____

Email Address:

(Note: the PRC provides direct notices of many proceedings, including rulemakings and applications for new authorities only through email. The PRC will also post notices of these proceedings on its website, at <http://www.nmprc.state.nm.us/transportation/legal-notices.html>. If you wish to receive direct notices of these future proceedings, you must sign up on our website.)

I. FORM OF BUSINESS: (Check only one)

- LIMITED LIABILITY COMPANY**
- CORPORATION**
- GOVERNMENTAL/TRIBAL ENTITY**

PRIOR ILLEGAL ACTIVITIES

Has the Applicant (if a sole proprietor), or any officer or board member (if a corporation), or any partner (if a partnership), ever been indicted for, or convicted of fraud, fraudulent misrepresentation, or embezzlement?

- NO YES, INDICTED YES, CONVICTED

Name of Person _____

Offense _____

PARENTAL RESPONSIBILITY

18.3.10 NMAC

Are you subject to court ordered spousal or child support payments?

- NO YES

II. APPOINTMENT OF A RESIDENT AGENT FOR SERVICE OF PROCESS

You must appoint an agent other than yourself who is a resident of the State of New Mexico upon whom all legal notices may be served. Section 65-2A-28 NMSA 1978

Name of Agent _____

Street Address _____

Telephone No. & email

III. DESIGNATION OF AN ATTORNEY LICENSED IN NEW MEXICO If an attorney has assisted you in preparing this application or will be representing you before the Commission.

Name of Attorney

Law Firm & Address

Telephone No. & email

IV. DESCRIPTION OF TRANSPORTATION SERVICE TO BE PROVIDED:

AMBULANCE SERVICE (NMSA 1978, §65-2A-3(B)):

“Ambulance service means the intrastate transportation of sick or injured persons in an ambulance meeting the standards established by the commission under the Ambulance Standards Act [in 18.3.13 NMAC]

Please give a specific description of the service to be provided:

DESCRIPTION OF TERRITORY TO BE SERVED:

V. (By county only) From Points and Places in:

and Return.

To Points and Places:

and Return

STATEWIDE (To and from all Counties throughout the State of New Mexico)

VI. EQUIPMENT TO BE STATIONED (Physical address):

OATH OF APPLICANT

The signature must be that of the Applicant, not legal representative.

I certify that I will abide by all New Mexico Public Regulation Commission Rules & Regulations. I understand that the New Mexico Public Regulation Commission has also adopted & enforces Federal Motor Carrier Safety Regulations and Federal Hazardous Materials Regulations found in Title 49, Code of Federal Regulations, Chapter 3, with the variances adopted by the Motor Transportation Division of the New Mexico Department of Public Safety. I certify that all motor vehicles, and the drivers operating the vehicles, used in providing the services sought to be authorized meet the safety requirements of the Federal Motor Carrier Safety Regulations and the Federal Hazardous Materials Regulations.

I certify that I have sent in a COMPLETE application. I understand that if my application is INCOMPLETE, my application will be returned to me and I will have twenty (20) days to cure the deficiencies. I also understand that all fees paid will be forfeited to the state.

I certify that I am fit and able to provide the applied for transportation service, as evidenced by this affidavit, the above balance sheet, and all exhibits attached here to.

I also certify that I abide by all rules and regulations stated in the New Mexico Public Regulation Commission Motor Transportation Rules.

I further certify that I am authorized to make this application and affirm that the facts, statements and representations contained in this application and its attachments are true and correct to the best of my knowledge. I know that willful misstatements or omissions of material facts constitute administrative and criminal violations punishable by imprisonment and fines.

I hereby swear and attest that I have read the Motor Carrier Act §§ 65-2A-1 to 40 NMSA 1978 and the Commission's Motor Transportation Rules, and have a working knowledge of the contents therein, and will operate any authority permitted by the Commission in compliance with the Motor Carrier Act and the Commission's Rules.

Signed: _____

Title (If Any): _____

Date: _____

STATE OF _____
COUNTY OF _____

The person listed above personally appeared before the undersigned Notary Public in & for said County, in said State, who, being by me first duly sworn, says that he/she is authorized to make this application and that the facts, statements & representations contained in the application and attachments are true and correct to the best of his/her knowledge, information & belief.

Sworn & subscribed to before me this _____ day of _____ 20.

(SEAL)

Notary Public

My Commission expires:

CHECK LIST (for after pre-filing review is complete)

Before mailing your application, check to be sure that you have:

- **completed all sections of the application form;**
- **notarized the required forms;**
- **attached all other required forms, documents and exhibits;**
- **enclosed the original and three (3) copies of the application with all documents and exhibits attached to each copy;**
- **not stapled, paper clipped or binded any part of the application, or it will be returned.**

NEW MEXICO PUBLIC REGULATION COMMISSION

Addressed the mailing envelope correctly:

**New Mexico Public Regulation Commission
Transportation Division
P.O. Box 1269
Santa Fe, New Mexico 87504-1269**

Place sufficient postage on the envelope.

If you are requesting that confirmed copies of the application be sent back for your records, you MUST send a self addressed postage paid envelope.