

**PUBLIC REGULATION COMMISSION
TRANSPORTATION DIVISION
PO BOX 1269
SANTA FE, NEW MEXICO 87504-1269**

THIS IS AN ORIGINAL APPLICATION FOR: (check one)

FEES

_____ Cancellation of an operating authority

\$ 0.00

Please attach **ORIGINAL** Certificate, Permit, Endorsement or Warrant requesting cancellation for.

DEFINITION:

Cancellation means the voluntary, permanent termination of all or part of an operating authority.

APPLICANT IDENTIFICATION:

Applicant's Name: _____

Business Name (as listed with PRC): _____

Business Physical Location: _____

_____ Mailing Address: _____

Telephone Number: _____ PRC Number: _____

Type of authority held: _____ Certificate _____ Warrant
_____ Permit

The date which the applicant proposes to terminate all or part of its service.

VERIFICATION:

I, the undersigned, am authorized to make this application and affirm that the facts, statements and representations contained in this application and its attachments are full, true and correct according to the best of my knowledge.

Signed: _____ Title (if any): _____

Date: _____

STATE OF _____

COUNTY OF _____

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

Sworn and subscribed to before me this _____ day of _____ 20__.

(SEAL) Notary Public _____

My Commission Expires _____