Michigan Department
of Transportation
0195 (01/11)

DBE TRUCKING FIRM INFORMATION SHEET

Equipment Titles, Registrations, Insurance
& Lease Agreements

COMPANY NAME

CONTACT PERSON(S) AND TITLE(S)

TELEPHONE NUMBER	CELL PHONE NUMBER	FAX NUMBER

EMAIL ADDRESS	OTHER

LIST WHO YOUR FIRM HAS LEASE AGREEMENTS WITH (Attach agreements and additional pages if necessary)

EQUIPMENT LIST (All Tractors & Trailers): (Attach all updated information and any additional pages if necessary)

Year & Make	Type	VIN Number (Last 6)	Truck Number	Title rec'd by MDOT	Registration (exp date)	Insurance (exp date)
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I certify that the information presented on and accompanying this form is factual and true. Additionally, I agree to notify MDOT's OBD staff of any changes to this form as they occur and to provide supporting documentation in a timely manner to ensure MDOT's records are up to date and to avoid delays in processing blue sheets.

PRINT NAME/TITLE OF DBE REPRESENTATIVE

SIGNATURE OF DBE REPRESENTATIVE	DATE

PLEASE RETURN TO:

LANSING OFFICE
MDOT Office of Business Development
ATTN: Trucking Program
P.O. Box 30050, Lansing, MI 48909
FAX: 517-335-0945
PHONE: 517-335-6537 or Toll-free, 1-866-323-1264

FOR MDOT INTERNAL USE ONLY

MUCP TOTALS	CURRENT NO.:	CHANGED TO NO.:	INITIALS:	DATE:

Clear Form

EQUIPMENT LIST - CONTINUED (All Tractors & Trailers): (Attach all updated information and any additional pages if necessary)

Year & Make	Type	VIN Number (Last 6)	Truck Number	Title rec'd by MDOT	Registration (exp date)	Insurance (exp date)