

**Purpose:** Use this form as the cover sheet to fax forms/documents to DMV, Motor Carrier Services.  
**Instructions:** Motor carrier attaches completed cover sheet to the items to be faxed. Items may be faxed directly to DMV or may be delivered to any Customer Service Center (CSC). The CSC will fax the items to DMV headquarters.

**TO: DMV Motor Carrier Processing Center** FAX: 804-367-1073 TELEPHONE: 804-249-5140

**FAX SENT DATE**   
 (mm/dd/yyyy)

**TOTAL NUMBER OF PAGES**   
 (including this cover sheet)

**FROM:**(check one)

Motor Carrier

<input type="checkbox"/> <b>Customer Service Center (DMV USE ONLY)</b>	CSC NAME		
TELEPHONE NUMBER	FAX NUMBER	LOCATION CODE	CUSTOMER SERVICE REPRESENTATIVE NAME

**ACCOUNT INFORMATION**

CARRIER NAME		TELEPHONE NUMBER	CARRIER FAX NUMBER
<b>IRP</b>	ACCOUNT NUMBER	FLEET NUMBER	
	<input type="checkbox"/> ASSESSMENT <input type="checkbox"/> PAYMENT RECEIPT <input type="checkbox"/> INVOICE		
	<input type="checkbox"/> OTHER (describe)		
<b>IFTA</b>	ACCOUNT NUMBER	VIRGINIA IRP ACCOUNT NUMBER	
	<input type="checkbox"/> RDT 121, QUARTERLY TAX RETURN <input type="checkbox"/> ASSESSMENT <input type="checkbox"/> PAYMENT RECEIPT		
	<input type="checkbox"/> OTHER (describe)		