



**NORPASS Service Center**  
**343 Waller Avenue, Suite 304**  
**Lexington, Kentucky 40504**  
**Toll Free 877-224-7336**  
**Phone 859-259-3414**  
**Fax 859-259-2695**

**\*\*\* Check made payable to University of Kentucky\* COST: \$45.00 per transponder (\$47.70 for Kentucky Residents)**

1. CARRIER INFORMATION		2. POINT OF CONTACT		
Motor Carrier/Company:		Name:		
Leased to (if applicable) or DBA		Title:		
Address:		Phone:		
Address 2 ( for packages) if applicable:		FAX:		
Email Address:				
Indicate the State(s) Applying for: AK__ BC__ CT__ ID__ KY__ NY__ OR__ QC__ SD__ WA__				
US DOT Number:				
IFTA Number:		Base State:		
IRP Number:		Base State:		Expiration Date:
<b>VEHICLE REGISTRATION INFORMATION</b> (You may copy and attach additional sheets if necessary)				
<b>A COPY OF YOUR CAB CARD (or REGISTRATION if INTRASTATE) MUST BE SENT:</b>				
Transponder ID	VEHICLE IDENTIFICATION NUMBER	Unit Number	License Plate Number / State / Vehicle Make / Year	Registered Weight IRP Exp. Date

**One copy of this letter must be signed by a duly authorized official and returned to the NorPass Service Center in order to activate your participation in the Mainline Automated Clearance System.**

You Agree:

1. To install and use the transponder in accordance with the attached instructions. If your company already has a transponder installed in your vehicle(s), you agree to use it in the same manner.
2. To install and use each transponder only on the specific vehicle for which it was requested. Transponders may be moved from one vehicle to another, or new vehicle, only after you have informed ***the NorPass Service Center*** of the pending move.
3. To notify the ***NorPass Service Center*** immediately if any transponders are lost, stolen or if the vehicle for which it was issued was taken out of service.
4. To bypass an open weigh station only when the transponder indicates a “green by-pass” signal. If you do not receive a “green by-pass” signal, you agree to pull into the open weigh station and follow station personnel’s directions.
5. To report changes to your company name, address, phone number, vehicle credentials and any other information provided on your application.
6. To keep current all insurance, registration, and tax payments for the participating vehicles. Failure to do so will result in an automatic pull in at an open weigh station.
7. **In Washington**, the carrier must respond to the message on the reader board. If the reader board does not give a message the carrier may bypass the port/weigh station.
8. **Over dimensional carriers must check with individual jurisdictions for state requirements regarding bypassing of stations.**

Other:

**NO PRE-CLEARANCE GUARANTEE:** *NorPass* does not guarantee that all vehicles will always be allowed to bypass a participating weigh station. Each site has the capability to pull in vehicles at any time for legitimate purposes. Your company’s bypass rate will depend upon the safety performance of the company.

IN NO EVENT WILL THE NORPASS ORGANIZATION, ITS AGENTS, EMPLOYEES, CONTRACTORS, OR SUB-CONTRACTORS BE LIABLE TO YOU OR ANYONE ELSE FOR DAMAGES OF ANY NATURE, INCLUDING LOST PROFITS, LOST SAVINGS, LOST REVENUE OR OTHER SPECIAL, INCIDENTAL, PUNITIVE INDIRECT OR CONSEQUENTIAL DAMAGES ARISING OUT OF THE USE OF OR THE INABILITY TO USE THE TRANSPONDER, HOWEVER CAUSED. UNDER NO CIRCUMSTANCE IS **NORPASS** LIABLE FOR COSTS OF PROCUREMENT OF SUBSTITUTE PRODUCTS OR SERVICES.

Company Name:	
Authorized Company Official: (print name & title)	
Signature of Authorized Company Official	
Date	

If your company will be participating in the Border Crossing Project, please provide your authorization to release your vehicle information to a third party vendor, whom will be employed for the express purpose of transferring vehicle and cargo information between US and Canada Customs.

Authorization: YES \_\_\_\_\_ NO \_\_\_\_\_ Signature