



INTERNATIONAL REGISTRATION PLAN (IRP) ESTABLISHING BASE JURISDICTION AS AN ESTABLISHED PLACE OF BUSINESS

INTERNATIONAL REGISTRATION PLAN (IRP) REGISTRANT INFORMATION

REGISTRANT'S LEGAL ENTITY NAME	TAX IDENTIFICATION NUMBER	IRP ACCOUNT / FLEET NUMBER
REGISTRANT DOING BUSINESS AS NAME (if applicable)	PRINCIPAL OWNER NAME / TITLE	

The International Registration Plan (IRP Plan) requires that the IRP Registrant's physical address in the base jurisdiction be verified as either meeting the definition of Established Place of Business, or Business Residency.

In order to prove an Established Place of Business in Ohio, and therefore allow Ohio to serve as your Base Jurisdiction for IRP Apportioned Registration, you will need to complete both sections of this form and provide the required documents in the quantity indicated.

If the IRP Registrant's physical address does not meet the requirements of Established Place of Business as described in this form, do not submit this form and review the requirements for Business Residency as described in the BMV4846 IRP Establishing Base Jurisdiction and Proof of Residency form.

SECTION ONE

The entity above is qualified to select Ohio as its Base Jurisdiction for IRP Apportioned Registration due to providing documentation as to an Established Place of Business at a physical address in Ohio.

The definition of Established Place of Business according to the International Registration Plan is as follows:

"Established Place of Business" means a physical structure located within the Base Jurisdiction that is owned or leased by the Applicant or Registrant and whose street address shall be specified by the Applicant or Registrant. This physical structure shall be open for business and shall be staffed during regular business hours by one or more persons employed by the Applicant or Registrant on a permanent basis (i.e., not an independent contractor) for the purpose of the general management of the Applicant's or Registrant's trucking-related business (i.e., not limited to credentialing, distance and fuel reporting, and answering telephone inquiries). The Applicant or Registrant need not have land line telephone service at the physical structure. Records concerning the Fleet shall be maintained at this physical structure (unless such records are to be made available in accordance with the provisions of Section 1035) shall be specified by the Applicant or Registrant.

1. The Ohio Established Place of Business (EPOB) Ohio physical address for this entity is:

ESTABLISHED PLACE OF BUSINESS ADDRESS (Must be Ohio)	CITY	STATE OH	ZIP
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2. The Ohio EPOB listed above is:

Owned by the entity (and may be confirmed via the County Auditor's Office)

leased by the entity (and a copy of the commercial lease between this entity and the property owner has been provided)

3. The hours of business operation for the entity's EPOB listed above are:

Monday _____	to _____	Tuesday _____	to _____
Wednesday _____	to _____	Thursday _____	to _____
Friday _____	to _____	Saturday _____	to _____
Sunday _____	to _____		

- There are _____ individuals employed by the entity that may be found during regular business hours at this Ohio EPOB listed above. Provide a copy of the Ohio Bureau of Workers' Compensation (BWC) certificate of coverage.
- Photographs of the street-view, exterior signage, or Office Directory and interior office photos of the Established Place of Business address are required.
- The entity is required to be registered with the Ohio Secretary of State (LLC, LLP, LP, Inc., or Co) - a copy of the entity documents registered there have been included.
- The entity has a "Doing Business As Name" listed above that has been registered with the Ohio Secretary of State as a Registered Trade Name, or Fictitious Name- a copy of these documents registered there have been provided.
- The entity is NOT required to be registered with the Ohio Secretary of State (Sole-Proprietor, or GP) - a copy of the Owner or Partners, Ohio Driver License(s) have been provided.
- If the entity has provided a federal identification number as it's Tax Identification Number above a copy of the Internal Revenue Service correspondence re: Issuance, or Confirmation, of Federal Identification Number assigned to the entity have been provided.

SECTION TWO

- 1. I affirm, that the operational, employment, and maintenance, records for this entity's trucking business are stored here, and If requested will be made available at the Ohio EPOB, or Ohio Business Residency address listed above for Audit purposes.
- 2. I affirm, the entity will accrue mileage in Ohio during each IRP apportioned registration year.
- 3. I understand that should the Ohio Bureau of Motor Vehicles determine that the address above, or the documents provided, do not establish Ohio as the IRP Base Jurisdiction for this entity that vehicle registration activity may be limited, and fleet renewal applications may be denied.

PRINTED NAME	TITLE	E-MAIL ADDRESS	
SIGNATURE X			DATE

Mailing Address if different than the address provided in section 1 above.

MAILING ADDRESS	CITY	STATE	ZIP
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- Check this box if you are submitting the BMV4856 as a change of address for an existing IRP Account, and provide the IRP Account # where requested above.