m Minnesota Department of Transportation (MnDOT)
DOT **Trucking Entity Vendor Form (Instructions – see page 2)**

Trucking Entity Status:

☐ Not Included in MnDOT's Vendor System   ☐ Included in MnDOT's Vendor System (updating information)

Trucking Entity Type (check MTO or ITO):

☐ MTO (Multiple Truck Owner)/Broker

☐ ITO (Independent Truck Owner/Operator)	(include a **COPY** of the items below)
Operator Name: _____	(CDL) Number: _____
Truck Type: _____	(Insurance Policy) Number: _____
License Plate Number: _____	<u>Do you</u>: ☐ Own Truck (Title) or,
Truck/Unit Number: _____	☐ Lease Truck (Lease Agreement)

Trucking Entity Identification Numbers:

Federal Tax ID Number: _____   OR   (sole owner/proprietor) SSN: _____

Federal USDOT Number: _____

MN SWIFT/Vendor Number: _____

MN Tax ID Number: _____   OR   ☐ Exempt (refer to MN Department of Revenue website)

MN Secretary of State File Number: _____   OR   ☐ Exempt (refer to MN Secretary of State website)

MN Unemployment Account Number: _____   OR   ☐ Exempt (pursuant with M.S. 268.035, Sub. 20)

MN Worker's Comp. Policy Number: _____   OR   ☐ Exempt (pursuant with M.S. 176.041, Sub. 1)

Company Type: ☐ Corporation   ☐ LLC   ☐ Joint Venture   ☐ Partnership   ☐ Sole Proprietor/Independent Contractor

Trucking Entity Contact Information:

Company Full Legal Name: _____

Doing Business As (if different): _____

Street Address: _____   PO Box Number: _____   PO Box Zip Code: _____

City: _____   State: _____   Zip Code: _____   County: _____

Telephone Number: _____   Fax Number: _____

Company E-Mail Address: _____

Company Website Address (if applicable): _____

Trucking Entity Officers and Email Addresses: (* = required)

*Owner: _____   Email Address: _____

 *Payroll Manager: _____   Email Address: _____

*DBE Compliance Officer: _____   Email Address: _____

*EEO Officer: _____   Email Address: _____

Other (Name & Title): _____   Email Address: _____

Signature:

I the undersigned, attest that the information provided is truthful and accurate and that I'm a legal officer of the aforementioned company.

Name (print): _____   Signature: _____   Date: _____

Instructional Guide for Completing the Trucking Entity Vendor Form

Submission	**Electronic**: complete all applicable fields, scan and email the form to: lcusupport.dot@state.mn.us
	Facsimile: complete all applicable fields and fax to (651) 366-4249.
	US Mail: complete all applicable fields and mail to: MnDOT LCU Support, Mail Stop 650, 395 John Ireland Boulevard, Saint Paul, MN 55155-1899.
Trucking Entity Status	Before checking a box, please search for all or part of the vendor/company name in the MnDOT Contractor (Vendor) Lookup: http://transport.dot.state.mn.us/reference/refvendor.aspx
	If the search doesn't produce a result, check the "Not Included in MnDOT's Vendor System" box.
	If the search does produce a result and it matches the vendor/company name, check the "Included in MnDOT's Vendor System (updating information)" box.
Trucking Entity Type	If the vendor/company is a broker or has multiple trucks (units) registered with the Federal Motor Carrier Safety Administration (FMCSA), check the "MTO (Multiple Truck Owner)" box. A vendor/company can access FMCSA account information by visiting: http://www.safersys.org/CompanySnapshot.aspx
	If the vendor/company is owned by one individual and the truck is operated by that individual, check the "ITO (Independent Truck Owner/Operator)" box.
Trucking Entity Identification Numbers	**Federal Tax ID Number or Social Security Number (SSN)**: A unique number assigned by the Internal Revenue Service (IRS) to an individual, firm or corporation for federal tax withholding purposes. To determine whether or not a federal tax ID number is needed, refer to: https://www.irs.gov/businesses/small-businesses-self-employed/employer-id-numbers-eins. An ITO may use his/her social security number.
	Federal USDOT Number: A unique number assigned by the US DOT Federal Motor Carrier Safety Administration to a person or business entity that is hauling cargo or passengers in interstate or intrastate commerce. A vendor/company can access FMCSA account information by visiting: http://www.safersys.org/CompanySnapshot.aspx
	MN SWIFT/Vendor Number: A unique number assigned by Minnesota Management and Budget (MMB) Office to an individual, firm or corporation that provides direct or indirect services to the State. This number is obtained by registering with MMB. Please contact MMB at (651) 201-8106 or by visiting: https://mn.gov/mmb/accounting/swift/vendor-resources/
	MN Tax ID Number: A unique number assigned by the Minnesota Department of Revenue to an individual, firm or corporation for state tax withholding purposes. If exempt, check the "Exempt (refer to MN Department of Revenue website)" box.
	MN Secretary of State File Number: A unique number assigned by the Minnesota Secretary of State to a business entity that is conducting business in the state of Minnesota. If exempt, check the "Exempt (refer to MN Secretary of State website)" box.
	MN Unemployment Account Number: A unique number assigned by the Minnesota Department of Employment and Economic Development (MnDEED) to a business entity that employs workers. Unemployment insurance provides temporary, partial wage replacement to workers who lose their job through no fault of their own. To determine if the company is exempt or excluded, please review Minnesota Statute 268.035, Sub. 20 or contact the MnDEED at (651) 556-8425. If exempt, check the "Exempt (pursuant with M.S. 268.035, Sub. 20)" box.
	MN Worker's Compensation Policy Number: A unique number assigned by an insurance provider, which is then provided by the vendor/company to the Minnesota Department of Labor and Industry (MnDLI). Worker's Compensation insurance provides benefits, health care costs, lost wages when workers are hurt on the job. To determine if the company is exempt or excluded, please review Minnesota Statute 176.041, Sub. 1 or contact the MnDLI at (651) 284-5032. If exempt, check the "Exempt (pursuant with M.S. 176.041, Sub. 1)" box.
	Company Type: Check the appropriate box based on the company's filing with the Minnesota Secretary of State.
Trucking Entity Contact Information	Provide all applicable contact information.
Trucking Entity Officers & Email Addresses	At a minimum, provide the Owner, DBE Compliance Officer, EEO Officer and Payroll Manager's name and email address. Other officer contact information is important, but not required.
Signature	Print name, sign and date.