

New Transit Permit Instructions & Application

Page 1 of 2

OR OFFICIAL USE ONLY

PLEASE PRINT P.O. Box 201431 Helena, MT 59620-1431 • Phone (406) 444-3661 • Fax (406) 444-0116 • dojmvdsponsorplates@mt.gov • mvdmt.gov

Transit permits and plates are issued for the transportation of new motor vehicles, new trailers, or new or used mobile homes from a point outside Montana and over the highways of this state.

Fees include 3% administration fee per § 61-3-111, MCA.

We advise that you keep this information letter for your files, as it outlines the regulations and procedures for complying with the laws governing the business.

Laws and regulations for Montana transit dealers can be found at the Montana Code Annotated website https://archive.legmt.gov/bills/mca/index.html

License Requirements: § 61-4-301, MCA

Trip fee and quarterly reports: § 61-4-302, MCA

Display of plates: § 61-4-307, MCA

Single movement permit: § 61-4-310, MCA

Check off the items below to ensure submission of a completed report. Do not submit this page (the instruction page) with the application. It is for your records.

Complete and sign the Transit Application Form (MV82 page 2).

\$103 license fee

If requesting plates, remit \$22.66for each set of plates ordered. Only 5 sets of plates may be applied for unless the permit holder is able to demonstrate to the satisfaction of the department that additional sets are needed. Plates are sent to your business address and should be received approximately three weeks after the license is approved.

Return the application with the necessary fees.

Transit licenses will not be issued at the Vehicle Service Bureau's counter on a same-day basis.

weeks for license approval.



New Transit Permit Instructions & Application

Page 2 of 2

OR OFFICIAL USE ONLY

PLEASE PRINT P.O. Box 201431 Helena, MT 59620-1431 • Phone (406) 444-3661 • Fax (406) 444-0116 • dojmvdsponsorplates@mt.gov • mvdmt.gov

Name of Business						
Physical Address (required)			City	State	Zip	
Mailing Address (if different from above)			City	State	Σιρ	
			City	State	Zip	
Email Address	FEIN/Corp ID - Required		Phone N	Phone Number		
Name of Liaison:		E-mail Address:		Phone N	Phone Number:	
Mailing Address		City		State	Zip	
	Initial Fee	\$103.00)			
# of plates	_					
	Total					
motor vehicle dealers, distributors and manu Under penalty of law (§ 45-7-203, MCA), I cer to the best of my knowledge, information, ar	rtify that the statemen	the date	e of this Application. e and information con	ntained on this form	are true and correct	
Applicant agrees to comply with the provisio motor vehicle dealers, distributors and manu Under penalty of law (§ 45-7-203, MCA), I cento the best of my knowledge, information, are have full authority to do so.	rtify that the statemen	the date	e of this Application. e and information con	ntained on this form	are true and correct	
motor vehicle dealers, distributors and manu Under penalty of law (§ 45-7-203, MCA), I cer to the best of my knowledge, information, ar	rtify that the statemen	the date its made son nam	e of this Application. e and information con ned on this form; and,	ntained on this form if signing for a busir	are true and correct	
motor vehicle dealers, distributors and manu Under penalty of law (§ 45-7-203, MCA), I cent to the best of my knowledge, information, and have full authority to do so.	rtify that the statemen	the date its made son nam	e of this Application. e and information con ned on this form; and,	ntained on this form if signing for a busir	are true and correct ness entity or trust, I	