



STATEMENT OF FACTS MOTOR CARRIER FLEET NAME CHANGE

VEHICLE IDENTIFICATION NUMBER (VIN)	MAKE	CALIFORNIA LICENSE PLATE NUMBER
ACCOUNT NUMBER	LICENSE YEAR	CARRIER NAME

Complete **Sections A** and **B**

SECTION A — STATEMENT OF FACTS FOR CARRIER FLEET

CARRIER ADDRESS

There has been a name change for this account number.

1. Does the name change also reflect a change of ownership? Yes No

2. Check one of the following:

No change in the composition or operation of the fleet.

A change in the composition or operation of the fleet was effective on _____
MONTH, DAY, YEAR

Please explain changes:

SECTION B — CERTIFICATION AND SIGNATURE

I further agree to indemnify and save harmless the Director of Motor Vehicles, State of California, and subsequent purchasers of said fleet, for any loss they may suffer resulting from registration of the above described fleet in California, from issuance of a California certificate of ownership covering the same.

I certify (or declare) under penalty of perjury under the laws of the State of California that the foregoing is true and correct.

COMPANY NAME	DAYTIME TELEPHONE NUMBER ()
DATE	AUTHORIZED SIGNATURE X