

CA NUMBER (ISSUED BY CHP			

NOTICE OF CHANGE PRIVATE CARRIER OF PASSENGERS CERTIFICATE

This form is to be completed for a change of name, change of address, or adding or deleting a "Doing Business As" (DBA) name. If your business entity (i.e., individual, partnership, corporation, limited liability company) has changed in some way, a new application must be filed and a new CA number must be obtained from the California Highway Patrol. A Fictitious Business Name

CHANGE OF NAME	☐ CHANGE OF A	DDRESS [ADDING/DELETING DBA			
SECTION 1 — INFORMATION ON RECORD WITH THE DEPARTMENT						
Complete all items in this section.						
PRIVATE CARRIER OF PASSENGERS LEGAL NAME		EMAIL				
BUSINESS ADDRESS (NOT P.O. BOX OR PMB)	CITY	COUNTY	STATE	ZIP CODE		
MAILING ADDRESS (IF DIFFERENT FROM BUSINESS ADDRES	SS) CITY	COUNTY	STATE	ZIP CODE		
SECTION 2 — REQUESTED CHANGE	S TO THE PRIVATI	E CARRIER OF PASS	SENGERS ACCOUN	Т		
Complete only the items that are chang	ging.					
PRIVATE CARRIER OF PASSENGERS LEGAL NAME		EMAIL	TELEPHONE NUMBER			
BUSINESS ADDRESS (NOT P.O. BOX OR PMB)	CITY	COUNTY	STATE	ZIP CODE		
MAILING ADDRESS (IF DIFFERENT FROM BUSINESS ADDRES	SS) CITY	COUNTY	STATE	ZIP CODE		
ADD DBA		DELETE DBA				
I certify (or declare) under penalty of per	rjury under the laws	of the State of Californ	ia that the foregoing	is true and correct		
SIGNATURE OF AUTHORIZED REPRESENTATIVE			DATE			
If you have any questions, call (916) 657-8 Return the completed form to:	3153.					
REGULAR ADDRESS:		OVERNIGHT ADDR	ESS:			

DEPARTMENT OF MOTOR VEHICLES REGISTRATION OPERATIONS DIVISION MS: H875 P. O. BOX 932370 **SACRAMENTO, CA 94232-3700**

DEPARTMENT OF MOTOR VEHICLES REGISTRATION OPERATIONS DIVISION MS: H875 2415 1ST AVENUE SACRAMENTO, CA 95818