



OFFICE OF THE
BRITISH COLUMBIA CONTAINER
TRUCKING COMMISSIONER

CONTAINER TRUCKING SERVICES LICENCE ADDITIONAL TAG REQUEST FORM

This application form is available on the Office of the BC Container Trucking Commissioner's website or by request at the Office of the BC Container Trucking Commissioner.

Send your application to:

OBCCTC Registrar
Email: Registrar@obcctc.ca

Contact Information:

OBCCTC Registrar
Phone: 604-660-6051
Fax: 604-660-6045
Website: www.obcctc.ca

Use this application to apply for:

✓ **Additional Tags to be assigned to a CTS Licence**

This application is available on the Office of the BC Container Trucking Commissioner (OBCCTC) website or by request through the OBCCTC Registrar.



About this form: Submit this form and all supplemental documents to the OBCCTC when applying for additional tags to be assigned to a CTS Licence. (Registrar@obcctc.ca)

1. Licensee Information

Licensee Name: _____

CTS Licence Number: _____

Principal Contact Name: _____

Principal Contact Phone Number: _____

Principal Contact Email Address: _____

Company Address: _____

City: _____ Province: _____ Postal Code: _____

Yard Address (if different from above): _____

2. Additional Tag Request

Number of Company/Fleet Tags requested: _____

Number of I/O Tags requested: _____

Total Number of Tags Requested: _____

3. Criteria and Supporting Documentation

Business plan attached demonstrating that:

- Existing business is difficult to service due to the high utilization of the Licensee's current tag allotment; and/or
- A current customer has increased its container movement volume; and/or
- New business has been secured necessitating additional Tag capacity.

Business plan attached which includes the following information:

- The planned use of the additional tags
- The estimated impact of the additional tags on a Licensee's existing tag allotment
- A schedule for the implementation of the additional tags

4. Licensee's Fleet Performance Analysis

Current On and Off-Dock Drayage Trips per Day per Active Truck: _____

Current Fleet Utilization Percentage: _____

Projected On and Off-Dock Drayage Trips per Day per Active Truck (inclusive of additional tags):

Projected Fleet Utilization Percentage (inclusive of additional tags): _____

5. Declaration(s)

I declare that no sanctions have been assessed by the Vancouver Fraser Port Authority or the Container Trucking Commissioner against the Licensee, that no monies are owed to a Trucker under the *Container Trucking Act* or *Container Trucking Regulations* by the Licensee, and that the Applicant has not engaged in any activity prohibited by the Regulations or CTS Licence. I understand that this application is subject to verification by the OBCCTC and that the Container Trucking Commissioner has sole discretion to determine the number of additional tags allocated to the CTS Licence/Applicant.

This form must be signed by the holder of a CTS Licence or a person authorized to apply on behalf of the CTS Licence holder.

Full Name: _____ Title: _____

Signature: _____ Date: _____

FOR OFFICE USE ONLY

Processed By: _____

Additional Tags Granted YES No

Tags Granted: _____

Time Period Approval Valid: _____