

STANDARD CARRIER ALPHA CODE (SCAC) APPLICATION

The Standard Carrier Alpha Code (SCAC) is a unique two-to four-letter code assigned to transportation companies for identification purposes. The SCAC is required for U.S. Customs entry, Electronic Data Interchange (EDI), intermodal interchange agreements, when doing business with many shippers, on rate tariffs filed with regulatory agencies, and doing business with the U.S. Government. The SCAC application fee is **\$73.00** (*\$81.00 if payment is made by check in U.S. dollars payable through a Canadian bank*). Make checks and money orders payable to **NMFTA.** Mail completed application and payment to:

National Motor Freight Traffic Association, Inc., 1001 North Fairfax Street, Suite 600, Alexandria, VA 22314.

Applications paid by credit card may be **faxed to (703) 683-6296 or 6046.** See the reverse side of this application for instructions and further information. Call **(703) 838-1831** if you have questions.

NMFTA assigns SCACs to all companies except railroads. Railroads should contact Railinc Services, 7001 Weston Parkway, Suite 200, Cary, NC 27513, (919) 651-5077. Companies seeking identification marks for trailers, containers or chassis equipment operating in intermodal service should call NMFTA at (703) 838-1822 for further instructions.

Please Type or Print in Black Ink

1) Applicant/Company Information:

Legal Name				
Trade Name				
Mailing Address				
City	State	ZIP/Postal Code	Country	
Contact Person	Ema	ail		
Phone	Fax	Fax		
2) Name Change: (Please list previous SC	AC, Company Name and	d Address—leave blank if not app	licable)	
SCAC Company Name				
City			Country	
3) Type of Company/Operation: (check				
[] Motor Carrier by highway (trucks, busses, et	•		peliconter service	
[] Interstate		[] Broker—transportation broker MC#		
	MX # U.S. DOT #			
[] Intrastate or Local Cartage		[] Leasing Company—equipment leasing or renting		
[] Canada only		[] NVOCC—non-vessel operating common carrier		
[] Mexico only		[] Pipeline		
[] Private Carrier—not for hire		[] Tariff Publisher		
[] Transporter of exempt commodities		[] Travel Agent		
[] U.S. Government owned		[] Steamship Agent		
[] Exempt [] Other] Water Carrier—VOCC, steamship, barge, car ferry		
 4) U.S. Border Crossing Requirements: into the U.S. 5) Applicant's Representative (person of Do you want the annual renewal notice Company	completing this applic sent to the Applicant's	cation): (leave blank if applicant Representative? Yes / No	- -	
Mailing Address				
City	State	ZIP/Postal Code	Country	
Contact Person	Email			
Phone	Fax			
6) Credit Card Payment Information:	[] VISA [] Master	Card [] American Express [] Disc	cover \$73.00 U.S. Funds	
Card Number		Expiration Date (Month/Year)	/	

Address where you receive your statement _

City	State	Zip/Postal Code	Country	
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Person's name on card _____