

IRP-S
(Rev. 6/99)
TYPE OR PRINT [blue or black ink]

North Carolina Division of Motor Vehicles
APPORTIONED SUPPLEMENT APPLICATION

1. IRP ACCOUNT NUMBER: _____ FLEET NUMBER: _____
ACCOUNT NAME [indicate the full name(s) for the above account]
[First Registrant]

[Second Registrant] _____
[Relationship Name] _____

OFFICE USE
SUPPLEMENT NUMBER: _____

2. REGISTRATION PERIOD: EFFECTIVE DATE _____ EXPIRATION DATE _____

3. SUPPLEMENT INFORMATION [Place an X by the type(s) of supplement(s) you are filing, and complete the necessary forms]
THESE SUPPLEMENT TYPES CAN BE COMBINED WITHIN A SINGLE SUPPLEMENT [same vehicle cannot be involved]
TYPE OF SUPPLEMENT IRP FORM(S) REQUIRED TITLE/REGISTRATION FORM(S) REQUIRED

- DUPLICATE CAB CARD IRP-S & IRP-E NONE
- AMEND EQUIPMENT * [correct vehicle information] IRP-S, IRP-E, & IRP-W TITLE DOCS, MVR-330(s), MVR-32(s), etc [if applicable]
- STARS ** [replacement plate transaction--IRP vehicles only] IRP-S & IRP-E [surrender cab card(s)] MVR-18 (for each plate)

THESE SUPPLEMENT TYPES CANNOT BE COMBINED WITHIN A SINGLE SUPPLEMENT.
TYPE OF SUPPLEMENT IRP FORM(S) REQUIRED TITLE/REGISTRATION FORM(S) REQUIRED

- ADD EQUIPMENT [issue, transfer, exchange or exchange/transfer] IRP-S, IRP-E, & IRP-W [surrender cab card on transfer(s)] TITLE DOCS, MVR-330(s), MVR-32(s), etc [if applicable]
- WEIGHT GROUP CHANGE IRP-S & IRP-W [surrender cab card(s)] NONE
- CHANGE INSURANCE IRP-S (for PVT) IRP-S & Form E (for FHE, FHL, FHR) IRP-S & BMC-91 (for COM, CON, FHL)
- TURN-IN PLATE(S) IRP-S & IRP-E [surrender cab card(s)] RS20 [receipt for surrendered plate will be generated by the system]
- ADD JURISDICTION(S) IRP-S, IRP-M2 [pages 1&2], & IRP-W NONE
- CHANGE ACCOUNT NAME IRP-S, IRP-A, & IRP-E [must be changed for each fleet] TITLE DOCS, MVR330(s), MVR-32(s), etc [if applicable]
- CHANGE FLEET TYPE/COMMODITY CLASS IRP-S & IRP-F NONE
- RESERVED FOR FUTURE USE
- FLEET TO FLEET [transfer vehicle & plate] IRP-S, IRP-E, & IRP-W TITLE DOCS, MVR-330(s), MVR-32(s), etc [if applicable]

4. INSURANCE: IS THIS A CHANGE OF INSURANCE COMPANY OR POLICY NUMBER? YES NO
INSURANCE CERTIFICATION: I certify that I have Financial Responsibility as required by law for the motor vehicles operating in this fleet.

Insurance Co Name: _____ Insurance Policy Number: _____
SIGNATURE: _____ DATE: _____
MUST BE SIGNED IN INK BY ACCOUNT HOLDER OR AUTHORIZED REPRESENTATIVE OF FIRM OR BUSINESS

* AMEND EQUIPMENT SUPPLEMENTS Involve corrections to any vehicle information captured in IRP or on Title Documents. EXAMPLES: Year, Make, Body Style, VIN, Fuel Type, Titled Owner, Branded Title Code, Tax County/Situs, Equipment Number, Purchase Price, Purchase Date, Factory Price, Unladen Weight, Axles, Seats, Colorado Indicator, or Weight Group Number. Double Transfers & Title Corrections for IRP vehicles should be processed in AMEND EQUIPMENT supplement.

** STARS SUPPLEMENT Replacement Plate is the only plate transaction performed with the STARS Supplement. Three types of TITLE Transactions may be processed in the STARS Supplement. THESE ARE: Duplicate Title, Lien Recording, and Duplicate Title with Lien Recording