

**OWNERSHIP AND MANAGEMENT INFORMATION**

APPLICANT NAME: \_\_\_\_\_

**ALL APPLICANTS MUST ANSWER THIS QUESTION**

1. HAS ANY PERSON LISTED ON THIS FORM EVER BEEN CONVICTED OF A FELONY, OR IS HE/SHE PRESENTLY CHARGED WITH THE COMMISSION OF ANY SUCH CRIME?  YES  NO
2. IF THE ANSWER TO #1 IS YES:
  - a. HAS THIS FELONY BEEN PREVIOUSLY REPORTED TO MVD?  YES  NO
  - b. GIVE FULL DETAILS ON A SEPARATE SHEET INCLUDING CRIME, DATE, PLACE OF CONVICTION, SENTENCE RECEIVED, ETC. ALSO ATTACH COPIES OF ALL FINAL COURT JUDGMENTS FOR THOSE CONVICTIONS.

**TYPE OF APPLICANT (check only one box):**

- |  |  |  |  |
|--|--|--|--|
| <input type="checkbox"/> Individual            | <input type="checkbox"/> Partnership     | <input type="checkbox"/> Limited Partnership/LTD | <input type="checkbox"/> Limited Liability Company     |
| <input type="checkbox"/> Employee of Company   | <input type="checkbox"/> Limited Company | <input type="checkbox"/> Corporation             | <input type="checkbox"/> Limited Liability Partnership |
| <input type="checkbox"/> Other (Specify below) |  |  |  |

COMPLETE THE FRONT AND BACK OF THIS SHEET, ATTACHING ADDITIONAL SHEETS AS NECESSARY. IF ANY ITEM IS NOT APPLICABLE, MARK IT AS "NA".

INCLUDE THE FOLLOWING:

- A. INDIVIDUALS AND EMPLOYEES MUST COMPLETE BLOCK 1 ONLY. PERCENT OF OWNERSHIP NOT REQUIRED.
- B. ALL OTHER APPLICANTS: LIST ALL PARTIES WITH ANY OWNERSHIP INTEREST IN THE BUSINESS. IF ENTITY IS PUBLICLY TRADED, PLEASE INDICATE AS SUCH – OWNERS NEED NOT BE LISTED BUT OFFICERS AND DIRECTORS MUST BE.
- C. PARTNERSHIPS: LIST ALL PARTNERS. DESIGNATE THE MANAGING PARTNER.
- D. CORPORATIONS: LIST ALL CORPORATE OFFICERS AND DIRECTORS.
- E. LIMITED LIABILITY COMPANIES: LIST ALL MANAGERS/ MEMBERS.
- F. LIMITED PARTNERSHIPS: LIST THE LIMITED PARTNER(S) AND GENERAL PARTNER(S).

NOTE: IF ANY OWNERSHIP INTEREST IS HELD BY A BUSINESS ENTITY (CORPORATION, LLC, LLP OR LP.), SUBMIT ADDITIONAL COPIES OF THIS FORM WITH THE INFORMATION LISTED IN B THROUGH D (ABOVE) FOR EACH BUSINESS ENTITY WITH ANY OWNERSHIP INTEREST UNTIL ONLY INDIVIDUALS ARE LISTED AS OWNERS.

**OWNERSHIP PERCENTAGES MUST TOTAL 100%.**

1.		
Name of Person or Business	Title	% of Ownership
Date of Birth	Driver's License # and State	SSN / TIN / EIN
If this is a business, is it PUBLICLY TRADED? <input type="checkbox"/> YES <input type="checkbox"/> NO		
2.		
Name of Person or Business	Title	% of Ownership
Date of Birth	Driver's License # and State	SSN / TIN / EIN
If this is a business, is it PUBLICLY TRADED? <input type="checkbox"/> YES <input type="checkbox"/> NO		
3.		
Name of Person or Business	Title	% of Ownership
Date of Birth	Driver's License # and State	SSN / TIN / EIN
If this is a business, is it PUBLICLY TRADED? <input type="checkbox"/> YES <input type="checkbox"/> NO		

## OWNERSHIP AND MANAGEMENT INFORMATION (CONT.)

**BUSINESS NAME:** \_\_\_\_\_

4.		
Name of Person or Business	Title	% of Ownership
Date of Birth	Driver's License # and State	SSN / TIN / EIN
<b>If this is a business, is it PUBLICLY TRADED?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO		

5.		
Name of Person or Business	Title	% of Ownership
Date of Birth	Driver's License # and State	SSN / TIN / EIN
<b>If this is a business, is it PUBLICLY TRADED?</b> <input type="checkbox"/> YES <input type="checkbox"/> NO		

### **CORPORATIONS: POWER OF ATTORNEY DESIGNATING AGENT FOR SERVICE (IF DESIRED)**

KNOW ALL PERSONS BY THESE PRESENTS:

That \_\_\_\_\_, a corporation organized under the laws of the state of \_\_\_\_\_, the principal office of which is located at \_\_\_\_\_ does hereby nominate, constitute and appoint \_\_\_\_\_, whose address is \_\_\_\_\_,

as its true and lawful attorney and agency for service in the State of Texas, and said corporation hereby consents to the service and process in all suits, proceedings, or causes of action, now pending or hereafter filed in the State of Texas in which the said corporation is a party or is to be made a party; that such agent shall be deemed as a service agent of said corporation for all intents and purposes as contemplated by the statutes requiring his designation and appointment.

#### **Privacy Statement**

The Texas Department of Transportation maintains the information collected through this form. With few exceptions, you are entitled on request to be informed about the information that we collect about you. Under Sections 552.023 of the Texas Government Code, you also are entitled to receive and review the information. Under Section 559.004 of the Government Code, you are also entitled to have us correct information about you that is incorrect. For inquiries call 512-416-4800.