



OHIO DEPARTMENT OF PUBLIC SAFETY  
BUREAU OF MOTOR VEHICLES

**INTERNATIONAL REGISTRATION PLAN (IRP)  
AFFIDAVIT OF VEHICLE NON-USE**

**International Registration Plan (IRP) Vehicle Registration Information**

|                   |                  |              |              |                                     |
|-------------------|------------------|--------------|--------------|-------------------------------------|
| REGISTRATION YEAR | IRP ACCOUNT NAME |              |              | IRP ACCOUNT / FLEET NUMBER          |
| UNIT NUMBER       | VEHICLE YEAR     | VEHICLE MAKE | PLATE NUMBER | VEHICLE IDENTIFICATION NUMBER (VIN) |

*If more than one vehicles are affected - attach a list including the above information for each additional vehicle*

All previously registered IRP vehicles with apportioned license plates assigned are presumed to be in continuous operation unless deleted from the IRP Fleet of registration prior to the registration expiration date. As such all renewal applications submitted 30-days after the registration expiration date are subject to a late registration penalty.

I am requesting the  late registration penalty to be waived and/or  the renewal registration for this vehicle to be pro-rated for less than 12 months due to the extenuating circumstances indicated below:

**Leased to Carrier:**

Documents Required - Lease agreement/copy of registration (if available)

**Ohio Base Plate:**

Documents Required - Copy of current Ohio Registration

**Non Operable:**

Documents Required (one of the following):

- Copy of accident report
- Copy of repair estimate
- Copy of receipt from mechanic

**Military:**

Documents Required (one of the following):

- Military orders
- Military ID
- Discharge papers

**Medical:**

Documents Required - Treatment record (with admittance/discharge date)

**Other:** \_\_\_\_\_

**THIS DOCUMENT WILL BECOME PART OF YOUR AUDITABLE RECORD**

I certify the statements above (and on attached sheets, if any) are true and complete to the best of my knowledge. In the case of requesting a pro-rated renewal that the vehicle(s) identified has not accrued any actual miles, or operated, from the date of my previous registration expiration until now.

|   |       |  |
|---|-------|--|
| AUTHORIZED REPRESENTATIVE'S PRINTED NAME          | TITLE |  |
| AUTHORIZED REPRESENTATIVE'S SIGNATURE<br><b>X</b> | DATE  |  |

**DEPARTMENT USE ONLY**

|   |   |
|---|---|
| LATE FEE WAIVED<br><input type="checkbox"/> YES <input type="checkbox"/> NO | REDUCE THE FEE MONTHS<br><input type="checkbox"/> YES <input type="checkbox"/> NO |
| SUPERVISOR<br><b>X</b>  | DATE <input type="checkbox"/> LATE FEE WAIVED                                     |