

## TENNESSEE DEPARTMENT OF REVENUE Motor Carrier Processing Agent

RV-F1310001 (Rev. 4/22)

**PURPOSE:** : To appoint a Tennessee Designated Agent for Service of Process. (Tenn. Code Ann.§65-15-109)

**INSTRUCTIONS:** Please follow instruction and complete form accordingly. Please mail this form to: Tennessee Department of Revenue, Vehicle Services Division, Motor Carrier Section, 500 Deaderick Street Nashville, Tennessee 37242.

A. PROCESSING AGENT INFORMATION (Agent must sign and date this form in section B.):					
Agent Name:			Phone:		
			City:		
State:	Zip:	Email Address:			· · · · · · · · · · · · · · · · · · ·
Applicant Company N	lame:		FEIN:		
DBA:		Company Pho	one Number:		····
Company Address:			City:	S <sup>.</sup>	tate:
Zip Code:	_ Email Address:				<del></del>
the legal document	to the carrier by c	ertineu man.			
<b>B. Signature of Processing Agent</b> : I, the undersigned will be the agent for service of process (Process Agent) for the Motor Carrier Listed above and under penalty for false statement do hereby certify that the information listed is true and correct. I am authorized to execute and file this document on behalf of the Motor Carrier.					
	Signature		Date	- Tit	le (if applicable)

**Print Name**