

## REQUEST FOR VOLUNTARY SURRENDER

Name on Permit: \_\_\_\_\_

Address on Permit: \_\_\_\_\_

\_\_\_\_\_

Type of Authority: \_\_\_\_\_

MnDot Number: \_\_\_\_\_

For the reason(s) stated below, this carrier, which is the owner of the above-identified permit(s), certificate(s), or license(s) hereby requests a voluntary surrender of such registration.

Reason for Request of Surrender:

I understand that upon surrender of this authority, operations may not resume unless the authority is reinstated or another authority has been issued.

---

Type/Print name of person authorized to submit this request

Phone Number

---

Signature of person authorized to submit this request

Date