



# Motor Vehicle Division

Mail Drop 532M  
 TPMSUMCS  
 Motor Vehicle Division  
 PO Box 2100  
 Phoenix AZ 85001-2100

96-0511 R02/09 www.azdot.gov

## TEMPORARY PERMIT AUTHORIZATION VERIFICATION REPORT

Type (check one*) <input type="checkbox"/> Allocated <input type="checkbox"/> Apportioned	Company Name	Office Phone (    )	Contact Person Name
Mailing Address	City	State	Zip Code
			Contact Person Phone (    )

TPA Control Number	Issue Date	MVD Account Number	Account Name	Unit Number	Vehicle Identification Number

MVD Use Only:

Date Received	Approved By
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\* Only one type of TPA should be tracked on each form.  
 Do not combine TPA types on one form.