

## Georgia Transport Compliance, Inc. Corporation and/or Authority Setup

Primary Officer:		
Name:		
Address:		
		County:
SSN:		
Phone:	Cell:	
Email:		
Incorporation/LLC Setu	<b>D</b>	
		h the Georgia Secretary of State you need
to provide us a minimum	of three business names you are w	villing to establish a company under. If
your first name option is r	ot available, then they will proces	ss the second option provided and so on.
1		<del>-</del>
2		
<u>Authority Setup</u>		
Legal Company Name:		
Physical Address:		
Mailing Address:		
Number of Trucks?	Gross Combined Veh	nicle Weight?
Number of Trailers?	EIN:	
<u>Circle One:</u> Interstate (Cro	ssing State Lines) or Intrastate (I	Local Only)
Hauling?		