Please check the box that applies:

□ I have an existing SunPass Account and am requesting a new Bus Registration; my SunPass account number is: ______

Registrations must be renewed yearly on anniversary of registration start date

□ I do not currently have a SunPass account and am requesting a new SunPass account with Express Lane Bus Registration.

□ I wish to renew my Express Lane Bus Registration my SunPass Account # is

| Please comp | lete the | following: |
|-------------|----------|------------|
|-------------|----------|------------|

| Drganization Name: |
|--------------------|
| Contact name: |
| Agency Phone: () |
| Contact phone: () |
| Address: |
| Email address: |

Personal Identification Number (PIN please select 4 digits): _____ ____ ____

Instructions: Enter all vehicles you wish to register/renew and the transponder number that will be linked to that vehicle. Please make additional copies as needed.

| License Plate | State | Year | Make | Model | Color | Transponder Number |
|---------------|-------|------|------|-------|-------|--------------------|
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Note- if you are a registered with the U.S. Federal Motor Carrier Safety Administration (USFMCSA) you must send proof of registration.

Additional transponders may be issued free of charge to qualifying vehicles. Please indicate if additional transponders are needed. Please include vehicle information.

| License Plate | State | Year | Model | Color | Transponder needed Y/N |
|---------------|-------|------|-------|-------|---------------------------|
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An Express Lane Representative will contact you to verify registration.

Representative name: _____

Representative Signature: x_____

Please send completed registration application and any applicable documentation to any of the following correspondence:

- Email- Expresslanereg@dot.state.fl.us
- Fax- 888-265-1725 Attn: Bus Registration
- Mail-in- Florida Department of Transportation, ATTN: Bus Registration, 7941 Glades Rd., Boca Raton, FL, 33434