

TRANSPORT REFRIGERATION UNIT ATCM TERMINAL INFORMATION FORM

Date:	EIN:
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INSTRUCTIONS:

- a. Check the appropriate box to indicate “New Terminal Information” or “Revised Terminal Information”.
- b. Complete this form for each California terminal that you operate and attach it to an Operator Report Form (TTD/FTB-033). All information is required, except as noted.
- c. Lessors and lessees that operate leased or rented TRUs or TRU generator sets must follow the procedures described in TRU Advisory 08-04.
- d. Keep a copy of this form for your records.

<input type="checkbox"/> New Terminal Information	<input type="checkbox"/> Revised Terminal Information
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TERMINAL INFORMATION (CALIFORNIA TERMINALS)

“Terminal” means any place where a TRU or TRU gen set equipped truck, trailer, shipping container, railcar or TRU gen set is regularly garaged, maintained, operated, or dispatched from, including a dispatch office, cross-dock facility, maintenance shop, business, or private residence.

Terminal Name (must be at least 4 characters):	Street Address:
City:	Zip Code:
County:	State: CALIFORNIA Non-California terminals do not need to report.
Contact Person Name (Last, First, M.I.):	
Contact Person Title:	Email Address (if email notices are accepted):
Contact Person Telephone Number:	

LIST IDNs ASSIGNED TO THIS CALIFORNIA TERMINAL:

