



Pennsylvania  
Department of Transportation

## 72 HOUR TRIP RECIPROCITY PERMIT APPLICATION

(The space above is for department use only)  
Bureau of Motor Vehicles • Commercial Registration Section  
P.O. Box 68286 • Harrisburg, PA 17106-8286

**Permit agents must purchase a minimum of one (1) book . Each book contains twenty-five (25) single trip permits. Each book is valued at \$375.00 (25 permits @ \$15.00 each).**

Permit Agent Last Name (or Full Business Name)		First Name	Middle Name	Business ID# (i.e. EIN)	Agent Number
Mailing Address					
City				State	Zip Code
Number of Permit Books Requested (25 Permits per book)	<b>@375.00 Book</b>		Total Due <b>\$</b>		
I hereby certify that the permits applied for will be used in accordance with the statutes and the rules and regulations of Pennsylvania.					
Signature of Permit Agent			Email Address/Telephone Number		
Title of Permit Agent			Date		
Make check or money order payable to the Commonwealth of Pennsylvania and mail it along with this application to the above address.					

### FOR DEPARTMENTAL USE ONLY (Applicant, Please DO NOT write here)

PERMIT NUMBERS ISSUED: \_\_\_\_\_  
Beginning Ending

DATE ISSUED/MAILED: \_\_\_\_\_

REQUEST VERIFIED BY: \_\_\_\_\_

☐ Check ☐ Money Order ☐ Cash