



**Western States Trucking Association**

334 N. Euclid Avenue • Upland, CA 91786  
(909) 982-9898 Office • (909) 985-2348 Fax

[www.westrk.org](http://www.westrk.org)

**American Alliance Drug Testing**



**American Alliance Drug Testing**

334 N. Euclid Avenue • Upland, CA 91786  
(909) 982-8409 Office • (909) 608-2058 Fax

[www.AADrugTesting.com](http://www.AADrugTesting.com)

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## WSTA/AADT & PrePass Contacts and Procedures

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**WSTA/AADT Contact**

**Vivian Mercader**

**(909) 969-1375**

**(909) 985-2348 Fax**

[Prepass@westrk.org](mailto:Prepass@westrk.org)

**PrePass Contact**

**(800) 773-7277, option 2, ext. 317-3572**

**(866) 877-0200 Fax**

[PrePassaccountmanagers@prepass.com](mailto:PrePassaccountmanagers@prepass.com)

- New applications can be emailed to WSTA/AADT at [prepass@westrk.org](mailto:prepass@westrk.org).
- Device Deposit: There will be a \$100 deposit for each device.  
Deposit will be refunded within 90 days of closing/transferring account out of our group and/or device has been verified to be received by PrePass.
- Billing inquiries/questions: Can be made to Vivian at [prepass@westrk.org](mailto:prepass@westrk.org) or (909) 969-1375.  
Note: PrePass always bills the month after it is complete. Ex.: When you receive an invoice in early November, it will be for the month of October.

Submit this form by one of the following methods, along with copies of your operating credentials.

Fax: 866.877.0200 | Mail: 101 N 1st Ave Ste. 2200, Phoenix, AZ 85003 | Email: [prepassaccountmanagers@PrePass.com](mailto:prepassaccountmanagers@PrePass.com)

APPLICANT					
Account Name:			Application Type: <input type="checkbox"/> New Account <input type="checkbox"/> Existing Account # _____		
Company Leased To or DBA Name:			USDOT Number:		CA Number:
BILLING					
Billing Contact:			Phone: <input type="checkbox"/> Office <input type="checkbox"/> Mobile <input type="checkbox"/> Home <input type="checkbox"/> Other -                         -                         ext.		
Address:			Fax: -                         -		
City:	State:	ZIP:	Email:		
SHIPPING					
Shipping Contact:			Phone: <input type="checkbox"/> Office <input type="checkbox"/> Mobile <input type="checkbox"/> Home <input type="checkbox"/> Other -                         -                         ext.		
Address:			Fax: -                         -		
City:	State:	ZIP:	Email:		
LICENSES & PERMITS					
L&P Contact:			Phone: <input type="checkbox"/> Office <input type="checkbox"/> Mobile <input type="checkbox"/> Home <input type="checkbox"/> Other -                         -                         ext.		
Address:			Fax: -                         -		
City:	State:	ZIP:	Email:		
SERVICES					
Services Applying For: <input type="checkbox"/> PrePass					
HAZARDOUS CARGO					
Hazardous Loads Hauled By Your Vehicles: (Choose All That Apply) <input type="checkbox"/> Hazardous Materials <input type="checkbox"/> Hazardous Waste <input type="checkbox"/> Fuel Tankers <input type="checkbox"/> None			Hazardous Cargo Frequency: (Choose One) <input type="checkbox"/> Dedicated <input type="checkbox"/> Occasional <input type="checkbox"/> No Hazardous Cargo		
AGREEMENT					
By signing below, I certify that I have read and understood the information on all pages of this application and the PrePass License Agreement, and indicate my authority and consent to bind the applicant in whose name this application is made to these terms. I attest that the included operating credentials and the information provided on all pages of this application are valid and accurate to the best of my knowledge.					
Signature:		Title:		Date:	

HOW DID YOU HEAR ABOUT PREPASS?	
<input type="checkbox"/> Word Of Mouth <input type="checkbox"/> Direct Mail <input type="checkbox"/> Internet <input type="checkbox"/> Magazine Ad <input type="checkbox"/> Sales Representative   Name: _____	
<input type="checkbox"/> Radio Ad <input type="checkbox"/> State Trucking Assn. <input type="checkbox"/> Trade Show <input type="checkbox"/> E-ZPass <input type="checkbox"/> OOIDA   Member Number: _____	
<input type="checkbox"/> PrePass Customer Referral   Account #: _____ <input type="checkbox"/> Customer Name: _____	
<input type="checkbox"/> Other: _____	<b>PROMO CODE:</b> _____



## VEHICLE INFORMATION

Provide the following information for the vehicles being enrolled, along with copies of their operating credentials.  
If enrolling more than five vehicles, please supply a truck list that includes all these fields.

☐ I want HELP-owned devices

☐ I want to purchase devices for the vehicles that are being enrolled.<sup>a</sup>

CONTACT		
Account Name (From Account Application):	USDOT Number:	CA Number:
Contact Name:	Phone: _____ ext. _____	

VEHICLE #1					
Equipment ID:	Plate Number:	State:	Vehicle Identification Number (VIN):		
IRP Account Number <sup>b</sup> :	Transponder Number <sup>c</sup> :	Year <sup>d</sup> :	Make <sup>d</sup> :	VRN <sup>d</sup> :	

VEHICLE #2					
Equipment ID:	Plate Number:	State:	Vehicle Identification Number (VIN):		
IRP Account Number <sup>b</sup> :	Transponder Number <sup>c</sup> :	Year <sup>d</sup> :	Make <sup>d</sup> :	VRN <sup>d</sup> :	

VEHICLE #3					
Equipment ID:	Plate Number:	State:	Vehicle Identification Number (VIN):		
IRP Account Number <sup>b</sup> :	Transponder Number <sup>c</sup> :	Year <sup>d</sup> :	Make <sup>d</sup> :	VRN <sup>d</sup> :	

VEHICLE #4					
Equipment ID:	Plate Number:	State:	Vehicle Identification Number (VIN):		
IRP Account Number <sup>b</sup> :	Transponder Number <sup>c</sup> :	Year <sup>d</sup> :	Make <sup>d</sup> :	VRN <sup>d</sup> :	

VEHICLE #5					
Equipment ID:	Plate Number:	State:	Vehicle Identification Number (VIN):		
IRP Account Number <sup>b</sup> :	Transponder Number <sup>c</sup> :	Year <sup>d</sup> :	Make <sup>d</sup> :	VRN <sup>d</sup> :	

<sup>a</sup> Price per device is \$100.00; shipping is available to US addresses only. Purchased devices are carrier-owned and may be enrolled in other pre-clearance systems

<sup>b</sup> Apportioned interstate vehicles will have an International Registration Plan (IRP) Account Number listed on their registration cab card.

<sup>c</sup> Provide a Transponder Number if the vehicle has a PrePass or PrePass-compatible device that is already installed; this is a 9-12 digit serial number found beneath the barcode on the device. If a transponder number is not provided upon enrollment, a PrePass transponder will be shipped.



# How To Apply For PrePass

**STEP 1:** Complete the enclosed Account Application. Please print legibly and fill out all fields.

**STEP 2:** Based on the states your vehicles travel in, attach copies of the following operating credentials:

TRAVEL IN	TYPE <sup>a</sup>	CREDENTIAL
ANY PREPASS STATE	Intrastate / Interstate	Vehicle Registration Card(s) <sup>b</sup>
	Interstate	IFTA License(s) <sup>c</sup>
CA	Intrastate	California Motor Carrier Permit <sup>c</sup>
CO	Intrastate	Insurance Card (For Each Vehicle)
	Intrastate / Interstate	Longer Vehicle Combination (LVC) Permit <sup>c</sup>
	Intrastate / Interstate	LVC Overweight Permit (For Each Vehicle) <sup>c,d</sup>
KS	Intrastate / Interstate	Kansas Combined Permit <sup>c</sup>
KY	Intrastate / Interstate	Kentucky Intrastate Tax (KIT) License
	Intrastate / Interstate	Kentucky Highway Use (KYU) License <sup>e</sup>
OH	Intrastate / Interstate	Alliance Hazmat Program Permit <sup>c</sup>
UT	Intrastate / Interstate	Divisible Overweight Permit <sup>c</sup>
WV	Intrastate	West Virginia PSC Operating Authority <sup>c</sup>
	Intrastate / Interstate	Alliance Hazmat Program Permit <sup>c</sup>

- Intrastate carriers travel in only one state. Interstate carriers are registered to travel in two or more states.
- For interstate vehicles registered under the same International Registration Plan (IRP) account, you may submit a single sample registration card along with a truck list that includes all of the fields from the Vehicle Information section. A separate registration card must be provided for each IRP account and for any intrastate vehicles.
- Submit if applicable to your carrier type. Will affect your eligibility to bypass at relevant sites if not provided.
- You must also provide your carrier's Colorado LVC permit if submitting Colorado overweight vehicle permits.
- KYU License required for vehicles with registered gross vehicle weight of 60,000 lbs. or greater.

**STEP 3:** If applying for PrePass Plus or Tolls Only service, refer to the included Vehicle Reference Chart. Write the Vehicle Reference Number (VRN) on the copy of each vehicle's registration card or provide a truck list that indicates the VRN for each vehicle.

**STEP 4:** If applying for PrePass Ag service, an authorized representative of your company must complete the enclosed PrePass Ag Application. Mail the completed form to the address specified.

**STEP 5:** Submit your paperwork via one of the methods listed at the top of your Account Application.

**For questions, call 1-800-PrePass (773-7277), email [prepassaccountmanagers@PrePass.com](mailto:prepassaccountmanagers@PrePass.com) or visit [www.PrePass.com](http://www.PrePass.com).**

## SPECIAL NOTES

### PrePass Service

Enrollment and participation in PrePass is dependent upon validation of your carrier safety ratings and operating credentials by PrePass member states. For more information about PrePass safety criteria, please visit [www.PrePass.com](http://www.PrePass.com).

Interstate carriers must have paid their current Unified Carrier Registration (UCR) fees in order to bypass in participating states. Vehicles that travel in New Mexico must have a valid New Mexico Weight Distance Tax (WDT) account to be eligible to bypass in that state. No UCR or NM WDT credentials need to be submitted with your application; registration will be validated electronically.

You may enroll using transponders previously issued by PrePass for your carrier's inventory, or with compatible transponders issued by another party. Transponders will be shipped for your vehicles unless you provide the transponder serial numbers and vehicle assignments at the time of enrollment.

### State Vehicle-Type Restrictions

- Arkansas: Vehicles with a Gross Vehicle Weight (GVW) of 26,000 lbs. or less are not eligible to bypass.
- California: Only commercial motor vehicles listed in CVC 34500 are eligible to bypass. These include: Truck tractors; Motor trucks with three or more axles; A vehicle towing a vehicle, such as a trailer or semi-trailer; with a GVW of more than 10,000 pounds; A combination of a motor truck and a vehicle(s), such as a trailer or semi-trailer, that exceeds 40 feet in length when coupled together; Two-axle interstate vehicles with a gross vehicle weight of 10,001 lbs. or more which are part of an interstate fleet and subject to Federal Motor Carrier Safety Regulations; Two-axle interstate vehicles with a gross vehicle weight less than 10,001 lbs. with a DOT number associated with an interstate carrier that also has motor trucks with 3 or more axles or truck tractors enrolled.