FORM 2

UNIFORM INTERMODAL INTERCHANGE AND FACILITIES ACCESS AGREEMENT

(A Program of the Intermodal Association of North America)

Participating Party Agreement

The Party named below agrees that by executing the Uniform Intermodal Interchange and Facilities Access Agreement (UIIA) it will be bound by the provisions of the UIIA, and subsequent amendments and/or revisions of that Agreement, and any addendum thereto, that does not conflict with the terms of this Agreement, which govern the interchange and use of Equipment in intermodal interchange service. The Provider named below agrees that in its interchange activities with Motor Carrier participants who are signatories to the Agreement, this Agreement will be the only Agreement it will use, unless superseded in whole by a separate bilateral written equipment interchange agreement.

This Agreement shall be effective unless cancelled in writing, by mutual consent of the Parties, or by any Party upon thirty (30) days prior Notice to the other Party. A copy of the required written Notice must be provided to the President of IANA at the time it is issued. **[Revised 08/01/14]**

COMPANY NAME:_____

AUTHORIZED BY: (Print or Type)_____

SIGNATURE:_____ **TITLE:**_____

BUSINESS ADDRESS:_____
(Mailing Address) No. Street City

_____
State/Province Zip/Postal Code Phone No. Fax E-Mail

Indicate Nature of Business: _____ Motor Carrier _____ Provider

If Motor Carrier, please check all that apply to your business operations: ☐ Smartway Carrier

☐ For Hire ☐ Private ☐ Interstate ☐ Intrastate ☐ Commercial Zone/Terminal Area Operator

Standard Carrier Alpha Code (SCAC):_____

MC Number: _____ **DOT Number:** _____

Tax Identification No. or Canadian Business Number: _____

The provisions of this agreement shall become effective on the date accepted by the Association of the above named carrier and published in the list of subscribers or supplements thereto.

Acceptance Date:_____ By:_____
Assistant Vice President
Intermodal Information Services

***NOTE: THE PARTICIPATING SIGNATURE PAGE (FORM 2) SHOULD BE SENT VIA E-MAIL TO UIIA@INTERMODAL.ORG OR BY FAX TO (301)982-3414. THE ORIGINAL PARTICIPATING PARTY SIGNATURE PAGE MUST BE RETURNED TO THE UIIA OFFICE WITHIN 30 DAYS AT THE FOLLOWING ADDRESS: INTERMODAL ASSOC. OF NORTH AMERICA, C/O UIIA, 11785 BELTSVILLE DRIVE, SUITE 1100, CALVERTON, MD 20705**

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Acceptance Date: _____ By: Debbie Tasko

Assistant Vice President
Intermodal Information Services

***NOTE: THIS COPY OF THE PARTICIPATING PARTY SIGNATURE PAGE SHOULD BE MAINTAINED BY YOUR COMPANY.**