

**APPLICATION FOR LICENSE(S) OF MOTOR FUELS**

**Type of Ownership**

- |                                                              |                                      |
|--------------------------------------------------------------|--------------------------------------|
| <input type="checkbox"/> Sole Proprietor<br>(one owner)      | <input type="checkbox"/> LLP         |
| <input type="checkbox"/> Partnership<br>(two or more owners) | <input type="checkbox"/> LLC         |
| <input type="checkbox"/> Other (explain) _____               | <input type="checkbox"/> Corporation |

**I hereby make application for the following license(s):**

- |                                                       |                                                                                          |
|-------------------------------------------------------|------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Supplier/Permissive Supplier | <input type="checkbox"/> Tank Wagon Operator - Importer                                  |
| <input type="checkbox"/> Terminal Operator            | <input type="checkbox"/> Wholesaler or Retailer (Fuel Vendor)                            |
| <input type="checkbox"/> Exporter                     | <input type="checkbox"/> Eligible Purchaser                                              |
| <input type="checkbox"/> Transporter                  | <input type="checkbox"/> Producer or Blender - Biodiesel or Dyed Biodiesel (Fuel Vendor) |
| <input type="checkbox"/> Occasional Importer          | ( Please complete the reverse side)                                                      |
| <input type="checkbox"/> Bonded Importer              |                                                                                          |

**Please print or type the information below.**

Mailing address (For all correspondence)

FEI/Social Security Number

Street

Owner, Partnership, or Corporate Charter Name

City

State

Zip

Trade Name (Doing business as)

Physical location business (No P.O. Box)

Business Phone Number

Fax Number

Street

City

State

Zip

(If more than one location, attach separate sheet)

**Name(s) of business partners, or officers:**

Social Security Number	Name/Title	Home Mailing Address

Oklahoma law requires motor fuel licensees to post a bond (if a bond is needed) at the time of filing a license application. A surety bond must accompany the license application before a license is issued. Bond application is enclosed.

I declare that the information contained in this document and any attachments is true and correct to the best of my knowledge and belief.

SIGN

HERE: \_\_\_\_\_

DATE: \_\_\_\_\_

**PRODUCERS OF BIODIESEL AND/OR DYED BIODIESEL**

1. Projected number of gallons to be produced each month:

Biodiesel \_\_\_\_\_ Dyed Biodiesel \_\_\_\_\_

2. If more than 400 gallons per month, please provide your Federal Permit Number: \_\_\_\_\_.

3. Physical location where the biodiesel will be produced:

\_\_\_\_\_

City State Zip Code

4. Phone Number: \_\_\_\_\_

**Please note that motor fuel tax is due on any biodiesel produced and used on the roads and highways in Oklahoma.**

**You will be required to file a monthly Miscellaneous Report and remit any tax due the the 1st day of each month.**

**BLENDER OF BIODIESEL AND/OR DYED BIODIESEL**

1. Projected number of gallons to be blended each month:

Biodiesel \_\_\_\_\_ Dyed Biodiesel \_\_\_\_\_

2. Please provide your Federal Permit Number: \_\_\_\_\_.

3. Physical location where the blending will be done:

\_\_\_\_\_

City State Zip Code

4. Phone Number: \_\_\_\_\_

**Please note that motor fuel tax is due on any biodiesel blended and used on the roads and highways in Oklahoma.**

**You will be required to file a monthly Fuel Blender Report and remit any tax due within thirty (30) days of the blending event.**