





### PRODUCERS OF ETHYL ALCOHOL (ETHANOL)

1. Projected number of gallons to be produced each month: \_\_\_\_\_
2. Physical location where the ethyl alcohol (ethanol) will be produced:  
\_\_\_\_\_  
City State Zip
3. Do you maintain bulk storage facilities in Oklahoma?  Yes  No  
If yes, where are they located? \_\_\_\_\_

### PRODUCERS OF BIODIESEL

1. Projected number of gallons to be produced each month:  
Biodiesel \_\_\_\_\_ Dyed Biodiesel \_\_\_\_\_
2. Physical location where the biodiesel will be produced:  
\_\_\_\_\_  
City State Zip
3. Do you maintain bulk storage facilities in Oklahoma?  Yes  No  
If yes, where are they located? \_\_\_\_\_
4. If more than 400 gallons per month, please provide your Federal Permit 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 1st day of each month.**

### FUEL BLENDER OF ETHANOL AND/OR BIODIESEL

1. Projected number of gallons to be produced each month:  
Ethanol \_\_\_\_\_ Biodiesel \_\_\_\_\_ Dyed Biodiesel \_\_\_\_\_
2. Physical location where the ethanol and/or biodiesel will be produced:  
\_\_\_\_\_  
City State Zip
3. Do you maintain bulk storage facilities in Oklahoma?  Yes  No  
If yes, where are they located? \_\_\_\_\_
4. If more than 400 gallons per month, please provide your Federal Permit Number: \_\_\_\_\_

**Please note that motor fuel tax is due on any ethanol or 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 days of the blending event.**

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.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

Mail completed form to:

Oklahoma Tax Commission • Taxpayer Assistance Division • P.O. Box 26920 • Oklahoma City, OK 73126