

MFS

**OKLAHOMA TAX COMMISSION
APPLICATION FOR SPECIAL FUEL LICENSE**

Oklahoma Tax Commission - Taxpayer Assistance Division
Post Office Box 26920 • Oklahoma City, OK 73126



- a. Complete items 1 through 4.
- b. Sign and date agreement on reverse side.
- c. Attach appropriate bond (\$1000.00 or three (3) months estimated tax liability, whichever is greater) Form BT-161.

1. TYPE OF LICENSE: Dealer User Dealer/User

2. TYPE OF OWNERSHIP:

<input type="checkbox"/> Individual (Sole Proprietor)	<input type="checkbox"/> Oklahoma Corporation
<input type="checkbox"/> General Partnership	<input type="checkbox"/> Foreign Corporation
<input type="checkbox"/> Limited Partnership	<input type="checkbox"/> Limited Liability (LICO)
	<input type="checkbox"/> Other (explain) _____

3. OWNERSHIP INFORMATION:

Mailing address (For all correspondence):

FEIN/Social Security Number

Street and Number, PO Box or Rural Route and Box Number

Name of Individual, Partnership or Corporation

City, State, Zip

Trade Name (Doing Business As)

Physical location of business (No PO Box or Route Number):

Business Phone Number Fax Number

Street

Email Address

City, State, Zip County

Is location inside city limits? Yes No

(If more than one location, attach separate sheet)

4. NAMES, OF PARTNERS, CORPORATE OFFICERS, AND MANAGING OFFICER:

(a) _____
Name (Last, First, Middle Initial) Social Security Number Title

Mailing address (Street and Number, PO Box or Rural Route and Box Number)

City State Zip Code

(b) _____
Name (Last, First, Middle Initial) Social Security Number Title

Mailing address (Street and Number, PO Box or Rural Route and Box Number)

City State Zip Code

(c) _____
Name (Last, First, Middle Initial) Social Security Number Title

Mailing address (Street and Number, PO Box or Rural Route and Box Number)

City State Zip Code

APPLICATION FOR SPECIAL FUEL LICENSE



AGREEMENT

It is hereby agreed by the applicant, in consideration of the issuance of a Special Fuel Dealer and/or User License to the applicant by the Oklahoma Tax Commission, and as conditions of the license, that:

The applicant will adopt, make and keep records as required by law and the rules and regulations of the Oklahoma Tax Commission showing the purchases, receipts, inventories, sales, deliveries and use of all special fuel including the required delivery invoices, covering all receipts, purchases, sales, deliveries and use which records and invoices shall be subject to audit and examination at any time by the representatives of the Oklahoma Tax Commission and shall be kept for a period of at least three years on the premises at the address set out in the application.

The applicant will, on or before the 20th day of each month, make all reports on forms furnished by the Oklahoma Tax Commission, for the preceding month, required by law and the rules and regulations of the Oklahoma Tax Commission and at time of filing report will pay all special fuel use taxes shown due by such reports.

The applicant will transact his business in all respects in accordance with the special fuel use law of this state and the rules and regulations of the Oklahoma Tax Commission.

Upon receipt of notice of cancellation, by an order of the Oklahoma Tax Commission duly entered on its records after notice to him and a hearing thereon, of any license issued to him, the applicant will surrender such license and discontinue business operations thereunder as provided by law.

The undersigned has read the above agreement and each and every particular thereof and agrees to each condition upon which the license is issued.

Applicant further states that all matter and facts set forth in the foregoing applicant are true and correct.

(CORPORATE SEAL)
(IF CORPORATION)

Name of Applicant

By: _____
Signature

Date

ATTEST: _____
Secretary

Official Title

SIGNATURE:

A sole owner, general partner, responsible corporate officer, member, or authorized representative must sign this application.

I, the undersigned applicant or authorized representative, or if a corporation, a responsible corporate officer for the reporting and remitting of taxes, declare under the penalties of perjury that I have examined this application and attachments and to the best of my knowledge the facts set forth are true and correct, and that the requirements hereunder will be carried out in accordance with the laws of the State of Oklahoma and the rules and regulations of the Oklahoma Tax Commission. I further acknowledge and agree that sales, withholding and motor fuel taxes are trust funds for the State of Oklahoma and that any use of these trust funds other than timely remittance to the State of Oklahoma is embezzlement and can result in criminal prosecution.

Type or print name _____

Sign Name _____

Type or print title _____

Date _____ / _____ / _____
Month Day Year

Mandatory inclusion of Social Security and/or Federal Employer Identification Number is required on forms filed with the Oklahoma Tax Commission pursuant to Title 68 of the Oklahoma Statutes and regulations thereunder, for identification purposes, and are deemed part of the confidential files and records of the Oklahoma Tax Commission. The Oklahoma Tax Commission is not required to give actual notice of changes in any state tax law.