



**INTERNATIONAL FUEL TAX AGREEMENT APPLICATION
 DEPARTMENT OF TRANSPORTATION
 5300 BISHOP BOULEVARD
 CHEYENNE, WYOMING 82009-3340 (307) 777-4827**

**A \$10.00 LICENSE FEE PLUS \$3.00 PER SET OF DECALS
 MUST BE REMITTED WITH THIS APPLICATION. MAKE CHECK OR MONEY ORDER PAYABLE TO THE:
 WYOMING DEPARTMENT OF TRANSPORTATION.**

IF THERE IS ANY CHANGE IN COMPANY NAME, CORPORATE OFFICERS, ARTICLES OF INCORPORATION OR COMPANY ENTITY THAT RESULTS IN THE ISSUANCE OF A NEW FEDERAL EMPLOYER IDENTIFICATION NUMBER (FEIN) YOU MUST CANCEL YOUR ORIGINAL ACCOUNT, REAPPLY UNDER THE NEW NAME AND FEIN AND REMIT THE REQUIRED \$10.00 LICENSE FEE. PLEASE CONTACT US AT THE NUMBER ABOVE FOR A NEW APPLICATION. IF YOU HAVE EXPERIENCED A CHANGE IN ADDRESS OR TELEPHONE NUMBER PLEASE SEND WRITTEN NOTICE TO THE DEPARTMENT, ATTN: MOTOR VEHICLE SERVICES, IFTA SECTION.

FAILURE TO COMPLETE ALL OF THE INFORMATION BELOW MAY DELAY THE PROCESSING OF YOUR CREDENTIALS

**FEIN -FEDERAL EMPLOYER IDENTIFICATION NUMBER- (NO SOCIAL SECURITY #'S ACCEPTED) _____
 (FEIN MUST MATCH LEGAL NAME)**

NAME (SAME AS FEDERAL DOT #) _____

**DBA _____
 (NAME UNDER WHICH BUSINESS IS CONDUCTED)**

TYPE OF OWNERSHIP: INDIVIDUAL () PARTNERSHIP () CORPORATION () LLC ()

BUSINESS TELEPHONE NUMBER _____ BUSINESS FAX NUMBER _____

NAME OF CONTACT _____ PHONE NUMBER OF CONTACT _____

CONTACT EMAIL ADDRESS _____

PHYSICAL ADDRESS _____ CITY _____ STATE _____ ZIP _____

MAILING ADDRESS _____ CITY _____ STATE _____ ZIP _____

**U. S. DOT NUMBER _____ IF YOU LEASE TO ANOTHER COMPANY,
 THAT COMPANY'S DOT NUMBER _____**

IDENTIFY OWNERS, PARTNERS, OR CORPORATE OFFICERS (IF MORE SPACE IS NEEDED, ATTACH ADDITIONAL SHEETS):

NAME	TITLE	ADDRESS

PLEASE TURN OVER AND COMPLETE BACK PAGE

IF YOU REQUIRE THE INTERNATIONAL FUEL TAX AGREEMENT QUARTERLY REPORTS TO BE MAILED TO A REPORTING SERVICE PLEASE PROVIDE THE FOLLOWING AND ATTACH A POWER OF ATTORNEY:

REPORTING SERVICE NAME: _____

REPORTING SERVICE ADDRESS: _____

REPORTING SERVICE TELEPHONE NUMBER _____ REPORTING SERVICE FAX NUMBER _____

DO YOU WANT ALL PAPERWORK MAILED TO THIS ADDRESS? YES NO (PLEASE CIRCLE Y OR N)

PLEASE COMPLETE ALL OF THE FOLLOWING INFORMATION:

DO YOU HAVE BULK FUEL STORAGE IN WYOMING? YES _____ NO _____

DO YOU HAVE BULK FUEL STORAGE IN ANOTHER JURISDICTION? YES _____ NO _____

IF YES WHAT JURISDICTION(S)? _____

NUMBER OF VEHICLES OVER 26,000 LBS. OR HAVING 3 AXLES _____

DO YOUR VEHICLES HAVE WYOMING APPORTIONED PLATES ON THEM? _____

IF NO, WHAT JURISDICTION ARE THEY APPORTIONED IN? _____

HAVE YOU PREVIOUSLY BEEN LICENSED UNDER IFTA? _____ IF SO WHAT JURISDICTION(S) _____

ARE YOU CURRENTLY OR HAVE YOU EVER BEEN REVOKED UNDER IFTA? _____ IF SO WHAT JURISDICTION(S) _____

DO YOU INTEND TO CONSOLIDATE IFTA FLEETS BASED IN OTHER JURISDICTIONS WITH YOUR WYOMING IFTA FLEET? _____

WHAT IS THE NATURE OF YOUR BUSINESS? _____

The applicant agrees to comply with the reporting, payment, record keeping, and license display requirements as specified in the International Fuel Tax Agreement. The applicant further agrees that Wyoming may withhold any refunds due if the applicant is delinquent on payment of fuel taxes due any member jurisdictions. Failure to comply with these provisions shall be cause for revocation of the IFTA license in all member jurisdictions. **Note: This form must be signed by an owner, partner or authorized representative.**

Applicant certifies that the information given on the IFTA application is, to the best of their knowledge, true, accurate, and complete. Any falsification subjects applicant to appropriate civil and/or criminal sanction of the base jurisdiction.

IFTA LICENSE FEE \$10.00 \$ 10.00

DECAL SETS \$3.00 PER SET. # OF SETS REQUESTED _____ \$ _____
(ONE SET OF DECALS PER VEHICLE)

TOTAL = \$ _____

SIGNATURE

TITLE

PRINTED NAME

DATE

FOR WYDOT USE ONLY
Date License Issued: _____
Check Number: _____
Amount Paid: _____
Decals Issued: _____ to _____