

INTERNATIONAL FUEL TAX LICENSE APPLICATION AND REINSTATEMENT

North Dakota Department of Transportation, Motor Vehicle Division
SFN 17105 (11-2010)

Please Print or Type. See Instructions on Reverse Side.

1. ND IFTA Account Number

--	--	--	--	--	--	--	--	--	--	--	--

2. IRP Account Number

--	--	--	--	--	--

3. US DOT Number

--	--	--	--	--	--	--	--	--	--	--	--	--	--	--

4. Application Type (check one) <input type="checkbox"/> Original <input type="checkbox"/> Amendment <input type="checkbox"/> Reinstatement				5. Business Type (check one) <input type="checkbox"/> Individual <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation			
6. Applicant Legal Name				7. Trade/DBA Name (if different than legal name)			
8. Business Address							
City		State	Zip Code		Area Code - Telephone Number		
9. Applicant's Mailing Address					E-mail Address		
City				State	Zip Code		
10. Contact Person Name					Area Code - Telephone Number		
11. Federal Employer Identification Number (FEIN)				12. Social Security Number (Only if no FEIN)			
13. Previous IFTA License (indicate jurisdictions in which you had a prior IFTA License)							
14. Bulk Storage (indicate jurisdictions in which you maintain bulk storage)				16. License Type(s) <input type="checkbox"/> Commercial <input type="checkbox"/> Farm <input type="checkbox"/> Prorate			
15. Fuel Types (indicate the types of fuel your qualified vehicles use) <input type="checkbox"/> (D) Diesel <input type="checkbox"/> (G) Gasoline <input type="checkbox"/> (P) Propane <input type="checkbox"/> (GH) Gasohol <input type="checkbox"/> (NG) Natural Gas <input type="checkbox"/> (BD) Biodiesel							
Fee Calculation, Fuel Decal Request:							
A. Number of vehicles requiring fuel decals: _____ x \$1.00 = (See Instruction A on Reverse Side) decals: _____ \$ _____							
B. License Fee (original) _____ \$ <u>5.00</u>							
C. Original Application or Reinstatement Fee _____ \$ <u>20.00</u>							
D. TOTAL Enclosed _____ \$ <u>25.00</u>							

When ordering additional decals during the year, card fees are \$3.00.

CERTIFICATION: I certify that to the best of my knowledge the information and statements on this application are true and correct. I agree to comply with reporting, payment, record keeping and display requirements as specified by the International Fuel Tax Agreement. I further agree that North Dakota may withhold any refunds due me if I become delinquent in payment of fuel taxes, whether due North Dakota or any IFTA member jurisdiction. I also understand that failure to comply with these provisions shall be grounds for revocation of my fuel tax license in all member jurisdictions.

I certify with my signature that, to the best of my knowledge, the information is true, accurate, and complete and any falsification subjects me to appropriate civil and/or criminal sanction of the base jurisdiction. (e.g., perjury).

Make check payable to: NDDOT

Applicant Signature

SEND APPLICATION AND PAYMENT TO:

MOTOR VEHICLE DIVISION/IFTA
ND DEPARTMENT OF TRANSPORTATION
608 E BOULEVARD AVE SUITE 103
BISMARCK ND 58505-0791
Telephone (701) 328-2928
Fax (701) 328-3500

Applicant Title

Date

--	--

 /

--	--

 /

--	--	--	--

Your fuel license and decals will be sent to your business address.

