

**KANSAS DEPARTMENT OF REVENUE
 CUSTOMER RELATIONS
 915 S.W. HARRISON ST.
 TOPEKA, KANSAS 66625-8000
 www.ksrevenue.org
 Phone Number: (785) 368-8222
 Fax: (785) 296-4993**

FOR OFFICE USE ONLY
DATE RECEIVED: _____
DATE APPROVED: _____

APPLICATION FOR
 KANSAS QUALIFIED BIODIESEL FUEL PRODUCER INCENTIVE

Name: _____ an individual-partnership-corporation
 (Strike out terms that do not apply)

of _____
 (Street address) (City) (County) (State) (Zip)

hereby makes application to the Department of Revenue, Division of Taxation, Topeka, Kansas 66625-8000, for the Kansas Qualified Biodiesel Fuel Producer Incentive.

1. The full and correct name of applicant is: (List names, title and address of each partner or officer. Attach a copy of the Articles of Incorporation or the Articles of Organization.)

NAME	TITLE	FULL ADDRESS
_____	_____	_____
_____	_____	_____
_____	_____	_____

2. Federal Employers Identification Number or SSN if an individual. _____

3. Principal mailing address of applicant: _____
 (Street address) (City) (State) (Zip Code)

4. List the physical location in Kansas where the applicant produces biodiesel.

5. Indicate whether the location is owned or leased by the applicant. _____

6. Annual plant production capacity: _____

7. Feedstock materials to be used in the production of biodiesel. (Check all boxes that apply).

- Soybean oil.
- Canola oil.
- Recycled cooking oil.
- Animal fat.
- Other (Describe) _____

8. Production start date: _____

Include a copy of your Certificate of Analysis verifying the biodiesel produced meets the ASTM standards.

Conditions:

Applicant has made no false statements as to any material fact in this application.

Applicant has complied with all State and Federal laws.

All persons employed by applicant in good faith agree to observe and conform to all of the terms and conditions.

STATE OF _____)
) SS:
 COUNTY OF _____)

I, _____ first being fully sworn, state that the above application and all statements and conditions contained therein, are true and correct.

 (Signature) (Title)

Subscribed and sworn to before me, this _____ day of _____, 20 _____

My commission expires _____ 20 _____

(Notary Public)

APPLICATION INSTRUCTIONS

FOR KANSAS QUALIFIED BIODIESEL FUEL PRODUCER INCENTIVE MF-180

This application must be completed and approved to be a qualified biodiesel fuel producer and to be eligible for the incentive.

Indicate name, street address, city, county, state and zip code for the individual partnership or corporation making application to the Department of Revenue.

1. List the full and correct name, title and address of the applicant. If the applicant is a partnership, list the names, titles and addresses of each partner. If the applicant is a corporation, list the names, titles and full addresses of the officers. A copy of the Articles of Incorporation is required. If the applicant is a limited liability company, list names, titles and full addresses of the officers. A copy of the Articles of Organization is required. Attach additional pages if needed.
2. List the Federal Employers Identification Number, or the social security number if you are an individual owner.
3. Indicate the principal mailing address of the applicant.
4. List the Kansas physical location where the applicant produces biodiesel.
5. Indicate if the location is owned or leased.
6. List the production capacity of the biodiesel plant.
7. Check the appropriate boxes indicating the feedstock materials to be used in the production of biodiesel. Use the 'other' line to indicate any feedstock materials not listed.
8. Indicate the biodiesel production start date.

A copy of your Certificate of Analysis verifying the biodiesel produced meets the American Society for Testing Materials (ASTM) standards must be attached.

Complete the 'conditions' section of the application. The application must be signed by an owner or officer and must be properly notarized.

Mail the completed application to:

Kansas Department of Revenue
Motor Fuel Tax
915 S.W. Harrison Street
Topeka, Kansas 66625-8000
(785) 368-8222

If you have questions, please contact the Motor Fuel Tax segment at the phone number or address listed. You will be notified when the application is approved.