

Fee Enclosed \_\_\_\_\_

**KANSAS DEPARTMENT OF REVENUE  
CUSTOMER RELATIONS  
TOPEKA, KANSAS 66625-8000  
www.ksrevenue.org  
Phone Number : (785) 368-8222  
Fax (785) 296-2703**

FOR OFFICE USE—LEAVE BLANK  
License No. \_\_\_\_\_  
Date Mailed \_\_\_\_\_

**Fee is \$10.00 per vehicle**

MAKE REMITTANCE PAYABLE TO  
"Kansas Department of Revenue "

**APPLICATION FOR LIQUID FUELS CARRIER'S LICENSE AND CERTIFICATES**

1. Legal name \_\_\_\_\_

2. DBA name \_\_\_\_\_

3. Business mailing address  
Street Address or Post Office Box City State Zip Code

4. Business location address  
Street Address City County State Zip Code

5. Federal Employers Identification Number \_\_\_\_\_ 6. Business Phone Number (\_\_\_\_\_) \_\_\_\_\_

FAX Number (\_\_\_\_\_) \_\_\_\_\_

7. Check type of ownership:  Individual  Partnership  Corporation  Other \_\_\_\_\_

8. List owner, partners, corporate officers and all stockholders who own 5% or more of company stock.

Name	Address	Title	Social Security Number	Telephone Number
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

9. The correct description of each vehicle which applicant will use in Kansas in such business, and for which the applicant desires a liquid fuels carrier's license certificate, is: (List here separately each vehicle that transports liquid fuels or motor-vehicle fuels from any refinery, place of production or manufacture, or pipe-line terminal, or across the state line, in quantities of 120 gallons or more over any of the public highways of this state; and also each vehicle that transports such fuels in quantities of 3,500 gallons or more over any of the public highways of this state from any point of origin other than a refinery, place of production or manufacture, or pipe-line terminal.) **Attach list of additional vehicles if necessary.**

Make and Year	Kind of Vehicle Truck/Truck-Tractor	VIN No.	Gallons Carrying Capacity	Leave Blank Certificate No.
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

10. What type or types of fuel or fuel additive are you hauling in the State of Kansas?  Diesel,  Gasoline,  Ethanol,  Methanol,  Kerosene,  Alcohol,  Propane,  Compressed Natural Gas,  E-85,  Jet Fuel,  Other, Please describe \_\_\_\_\_

11. Are you a licensed Distributor in the State of Kansas?  Yes  No, Distributor License # \_\_\_\_\_ If yes, do you only haul fuel for own retail locations located in the State of Kansas?  Yes  No

12. Are the above described vehicles properly painted in compliance with the law and the rules and regulations and will be painted before operating in Kansas.  Yes  No (See back K.A.R. 92-3-6)

13. Are the applicant(s) at least 18 years of age?  Yes  No

14. Are you or any partner, corporate officer or stockholder owning more than 5% of company stock delinquent in payment of any motor fuel taxes, interest or penalty to a taxing agency in any state or to the federal government?  Yes  No

15. Have you or any partner, corporate officer or stockholder owning more than 5% of company stock been convicted of a felony involving theft within 5 years immediately preceding the date of making application in this or any other jurisdiction?  Yes  No

16. Have you or any partner, corporate officer or stockholder owning more than 5% of company stock been convicted of a felony involving fraud or tax evasion in this or any other jurisdiction?  Yes  No

**OVER**

17. Have you or any partner, corporate officer or stockholder owning more than 5% of company stock had a motor fuel license revoked for cause in another state?  Yes  No
18. Do you or any partner, corporate officer or stockholder owning more than 5% of company stock intend to carry on the business authorized by the license as agent of another?  Yes  No
19. If you answered yes to any question 14-19, please explain on a separate sheet of paper.

State of \_\_\_\_\_, County of \_\_\_\_\_, ss:

I, \_\_\_\_\_, first being fully sworn, state that the above application, and all statements contained  
(Print Name)  
therein, are true and correct under the penalty of perjury.

\_\_\_\_\_  
(Signature of Owner, Partner, Corporate Officer, or Person Authorized by Attached Power of Attorney)

\_\_\_\_\_  
(Title)

Subscribed and sworn to before me, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

My commission expires \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
(Notary Public)

## INSTRUCTIONS

Line 9 MAKE AND YEAR—This can be abbreviated, as an example, "IHC' 96" or "Chev' 99."

KIND OF VEHICLE—Show whether vehicle is a Truck or Truck-Tractor.

VEHICLE IDENTIFICATION NUMBER (VIN)—On a truck or truck-tractor, give the VIN only. It is not necessary to describe the semi-trailer.

CARRYING CAPACITY—This figure (in gallons) is to be inserted if the cargo carrying capacity of the vehicle is 120 gallons or more, up to and including 3,500 gallons. If vehicle is a truck-tractor, show cargo carrying capacity of towed unit.

- ITEM (13)—**KAR 92-3-6.** States marking of vehicles transporting liquid fuels. Each vehicle used in transporting liquid fuel, which is subject to the law pertaining to the transportation of liquid fuel, shall be marked or lettered as follows: (a) The liquid fuel carrier's name and address shall appear in plain letters not less than two inches in height on a sharply contrasting background on each side of the vehicle; (b) The liquid fuel carrier's license certificate number shall appear in plain letters not less than two inches in height on a sharply contrasting background on each side of the vehicle.
- WHO MAY SIGN APPLICATION—Only the Individual Owner; Partner; Corporate Officers; listed on the application or a person who has been duly authorized as Attorney-in-fact by proper Power of Attorney which has been filed in this office; may sign the application.
- VEHICLES SOLD, LEASED, OUT OF SERVICE—When any vehicle which has been licensed is no longer used or has been sold or leased, under a long term lease, to another carrier, the LFCL certificate should be sent in immediately with written instructions for cancellation. If the certificate has been lost, send in letter with vehicle information to request the license be canceled.
- You must report any change in ownership including a change in partners, corporate offices or stockholders owning 5% or more of company stock within 30 days of the change.
- **ENCLOSE FEE OF \$10.00 PER VEHICLE**

This completed application or inquiries concerning this application should be directed to:

**CUSTOMER RELATIONS  
MOTOR FUEL TAX  
KANSAS DEPARTMENT OF REVENUE  
915 SW HARRISON ST  
TOPEKA, KANSAS 66625-8000  
www.ksrevenue.org  
OR  
PHONE: (785) 368-8222  
FAX: (785) 296-2703**