## MVD-11213 RFV: 07/12

## New Mexico Taxation & Revenue Department, Motor Vehicle Division



## APPLICATION FOR IFTA LICENSE RENEWAL



Please return completed application to: New Mexico Commercial Vehicles Bureau, P.O. Box 5188, Santa Fe, NM 87502-5188 2. U.S. DOT Number 3. ICC Number 4. NM CRS Number 5. Legal Name of Business 6. Federal Employer ID Number 7. DBA Name 8. State of Registration 9. Social Security Number 10. Physical Address (Business Location, Street or Rural Route, City, State, ZIP Code) 11. Mailing Address (Street or Box Number, City, State, ZIP Code) 12 Name of Person to Contact 13 Email Address 14. Telephone Number 15. FAX Number 16. Type of Business (fill in Q) O Corporation O LLC O Sole Proprietor (No Employees) O Sole Proprietor (With Employees) O Partnership O S-Corporation 17. List owners, partners, shareholders or three corporate officers: Social Security Number Home Phone Number Name Home Address, City, State, ZIP Code Social Security Number Home Phone Number Name Home Address, City, State, ZIP Code Name Social Security Number Home Phone Number Home Address, City, State, ZIP Code 18. Bulk Storage Locations Outside of New Mexico 19. Fill in (O) for each jurisdiction in which you travel 0 ALAlahama 0 KS 0 MIA New Mexico 0 VA Virginia Kansas 0 ΑK 0 0 Washington Alaska 0 KY Kentucky NY New York WA 0 0 0 0  $\mathsf{AZ}$ Arizona LA Louisiana NC North Carolina WV West Virginia 0 0 0 AR Arkansas ME ND North Dakota WI Wisconsin Maine 0 0 0 0 CA California MD Maryland OH Ohio WY Wyoming 0 0 Massachusetts 0 0 Alberta CO Colorado MA OK Oklahoma AB 0 CT Connecticut 0 Michigan 0 OR 0 BC British Columbia ΜI Oregon 0 O 0 0 DE MN Minnesota PA Pennsylvania MR Manitoba Delaware 0 0 RI 0 New Brunswick DC District of Columbia MS Mississippi Rhode Island NB o 0 0 0 SC Newfoundland FL Florida MO Missouri South Carolina NF 0 GΑ Georgia 0 MT Montana SD South Dakota 0 NS Nova Scotia 0 0 0 0 ID Idaho NE Nebraska TN Tennessee ON Ontario 0 IL Illinois 0 NV Nevada 0 ΤX 0 PΕ Prince Edward Island Texas 0 0 0 IN Indiana NHNew Hampshire UT Utah 0 PO Province of Quebec 0 New Jersey VT Saskatchewan IA Iowa NΙ Vermont SK 20. Applicant's Declaration The undersigned applicant has knowledge of the International Fuel Tax Agreement and accepts full responsibility for all IFTA-related taxes. The applicant is not licensed in another IFTA jurisdiction; nor has this license been revoked in any other IFTA jurisdiction. All information provided in this application is true, correct and complete to the best of applicant's knowledge. Applicant agrees to comply with all reporting, payment, recordkeeping, and license display requirements as specified in the International Fuel Tax Agreement. The applicant further agrees that the base jurisdiction may withhold any refunds due if applicant is delinquent on payment of fuel taxes due to any IFTA member jurisdiction. Failure to comply with these provisions shall be grounds for revocation of license in all member jurisdictions Applicant's Signature Date

## INSTRUCTIONS FOR APPLICATION FOR IFTA LICENSE RENEWAL

- 1. Enter your New Mexico Motor Transportation Department number.
- 2. Enter your U.S. Department of Transportation number.
- 3. Enter your Interstate Commerce Commission number (if applicable).
- 4. Enter your New Mexico Gross Receipts Tax number.
- 5. Enter your Legal Business Name (as used on your Federal and State Income Tax Returns).
- 6. Enter your Federal Employer ID Number (also referred to as Taxpayer Identification number by the Internal Revenue Service).
- 7. Enter your DBA Name under which you operate (if different from legal business name).
- 8. Enter the State where your vehicles are registered.
- 9. Enter your Social Security Number (if Sole Proprietor). Complete only if you are a Sole Proprietor with no employees, and you are not required to have a Federal Employer Identification Number.
- 10. Enter the actual physical location of the business.
- 11. Enter mailing address if different from physical address.
- 12. Enter name of person to contact who will file tax returns, and who can answer questions from the Department.
- 13. Enter email address for contact person.
- 14. Enter telephone number for contact person.
- 15. Enter FAX number for contact person.
- 16. Enter type of business, indicating your business structure (LLC means Limited Liability Company).
- 17. List owner if sole proprietor, partners if partnership, shareholders if S-Corporation, or officers if a Corporation. Home address, phone number, and Social Security Number are all required.
- 18. Enter all IFTA member states where you maintain bulk fuel storage.
- 19. Indicate all IFTA jurisdictions in which you travel.
- 20. Signature. This form must be signed by an owner, partner, or authorized representative