STATE OF MAINE
SPECIAL FUEL USER'S DECAL APPLICATION

Motor Carrier Services, Fuel Unit, 29 SHS, Augusta, ME 04333-0029
Tel: (207) 624-9000, **Ext**. 52137
www.maine.gov/sos/bmv

PLEASE CHECK ONE: **NEW APPLICANT** ☐ **ADDITIONAL DECAL(S)** ☐

**** For a **RENEWAL** Application, please call the Fuel Unit at (207) 624-9000, Ext. 52137 ****

Federal ID/SSN # or Social Insurance **(Required)**

DOT # (Required)

_____
Legal Name

_____
Mailing Address

_____
City **State** **Zip**

_____
E-mail address (if any)

_____
Doing Business As (DBA)

_____
Telephone Number (Required)

_____
Physical Location (No PO Box #'s)

_____
City / Town **State** **Zip**

Type of Ownership: Individual ☐ Partnership ☐ Corporation ☐ LLC ☐ Other ☐ _____

Type of Vehicles: Trucks ☐ Buses ☐ **(**Dealer plated vehicles do ***not*** require decals in Maine**)**

Do you lease vehicles? Yes ☐ No ☐ **If yes**, From others ☐ To others ☐

Number of Decals ***(1 decal per vehicle)*** _____ X **$5.00** = _____

Please make checks payable to: SECRETARY OF STATE

Upon filing this application with the State of Maine, you are exempt from filing fuel tax returns, ***except*** if you previously had an IFTA account. You **must** file all returns, pay any owed taxes, and close the IFTA account. Contact the IFTA Unit for additional information. If at any time during the tax year your status should change, you need to notify this office and file the necessary returns. I declare under penalty of false statement, that to the best of my knowledge and belief, the statements contained herein are true and correct.

Signature ***(Required)*** **Title** **Date**

Disclosure:
This statement is made in accordance with the Federal Privacy Act of 1974, Section 7(b). Providing your Social Security Number (SSN) or Federal Employer Identification Number (FEIN) is mandatory and is required by State and Federal law or rule to receive Motor Carrier credentials. Your SSN or FEIN will be used solely for identification purposes and will be kept confidential.

FOR OFFICE USE ONLY:

FROM _____ **TO** _____ **INTLS** _____ **REEL:** _____

CC AUTH #_____ **CHECK#** _____ **MO#** _____ **CASH** _____ **FRAME:** _____

BMV: _____ **F7:**_____ **ACC:** _____ **DOT:** _____