



Department of Taxation

P.O. Box 530  
Columbus, OH 43216-0530

License number assigned

MF 207  
Rev. 2/00

## Registration as a Transporter of Motor Fuel

For sole owner, print individual's name, address, owner's SSN and FEIN of the business. For a partnership, print full name, address and SSN of all partners and the partnership's FEIN. For an LLC or LLP, print the full name, address and SSN of all members. For a corporation, print the corporate name, corporation charter number issued by the Secretary of State authorizing business in Ohio and the corporation's FEIN. Use a separate piece of paper if necessary.

**Under penalties of prosecution, no person shall make a false or fraudulent statement on this application.**

1. Name of registrant \_\_\_\_\_  
(If you are a corporation, **DO NOT** use your name, use the corporation name.)

FEIN \_\_\_\_\_ SSN \_\_\_\_\_ Telephone \_\_\_\_\_

Fax \_\_\_\_\_ E-mail \_\_\_\_\_

2. Trade name if other than above \_\_\_\_\_

3. Check whether applicant operates as:  Sole owner  Partnership  Corporation  LLC  LLP  
 Association  Other (list) \_\_\_\_\_

4. If a corporation, date of qualification \_\_\_\_\_

List name, address and SSN of all corporate officers and directors

\_\_\_\_\_

5. If a corporation, state name and address of statutory agent

\_\_\_\_\_

6. If partnership, list name, address and SSN of all partners. If LLC or LLP, list name, address and SSN of all members.

\_\_\_\_\_

7. Business address (P.O. boxes not acceptable)

\_\_\_\_\_

8. Mailing address (if other than that shown on line 7)

\_\_\_\_\_

9. Is your company owned or controlled by any other person or corporation?  Yes  No If yes, give name, address and FEIN or SSN or the other person/corporation.

\_\_\_\_\_

\_\_\_\_\_  
Signature of dealer or officer of company

\_\_\_\_\_  
Title

\_\_\_\_\_  
Date

Return original application to the Ohio Department of Taxation, Motor Fuel Tax Refund Unit, P.O. Box 530, Columbus, OH 43216-0530. Retain copy for your files. Direct any questions to (855) 466-3921 or fax (206) 350-6722.