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State of New Jersey

Return to:

Division of Taxation

PO Box 189
Trenton, NJ 08695-0189

Pursuant to NJSA 54:39-101 et seq
10-2010

Date Completed

Form DMF-2

Application for Recognition as a Qualified Distributor

Section 1 – Business Information

Federal ID #	IRS 637 #	New Jersey Tax ID#	Does your company have internet access?	<input type="checkbox"/> Yes <input type="checkbox"/> No
Business Name			Webpage Address	
Trade Name			Phone Number	Fax Number
Physical Address				
Mailing Address				
Books and Records Address				

Section 2 – Contact Information

If you wish to give an attorney or accountant access to your tax information, you must supply us with an Appointment of Taxpayer Representative form (Form M-5008-R) giving us the authority to release confidential information to them.

Contact for Registration	Title	Telephone Number	Email Address
Contact for Reporting	Title	Telephone Number	Email Address
Individual Completing this form	Title	Telephone Number	Email Address

Section 3 – Types of Products Handled

Check each type of product with which you will be dealing in New Jersey

<input type="checkbox"/> Gasoline	<input type="checkbox"/> LPG	<input type="checkbox"/> Dyed Kerosene	<input type="checkbox"/> Undyed Kerosene
<input type="checkbox"/> Gasohol	<input type="checkbox"/> Undyed Diesel	<input type="checkbox"/> Undyed Biodiesel	<input type="checkbox"/> Aviation Fuel
<input type="checkbox"/> Fuel Grade Alcohol	<input type="checkbox"/> Dyed Diesel	<input type="checkbox"/> Dyed Biodiesel	
<input type="checkbox"/> Other - List each other product			

Section 4 – Fuel Suppliers

List Suppliers and provide requested information. Use a rider if necessary.

Name	Phone #	Federal ID #	License #	Products	Terminal #	How product is received

Section 5 – Bond information

Bond or Security must be 3 times the liability for the estimated gallons handled per month.

<u>List estimated gallons to be handled per month by product types as grouped below</u>			
Gasoline	Diesel & Kerosene (dyed & undyed)	Aviation Gasoline	Jet Fuel
Check type of Security to be used			
<input type="checkbox"/> Surety Bond	<input type="checkbox"/> Certificate of Deposit	<input type="checkbox"/> Letter of Credit	<input type="checkbox"/> Cash Deposit
		<input type="checkbox"/> Proof of Financial Responsibility	
Issue of Security Instrument		Number	Issue Date
			Amount
Address of Issuer		City, State Zip	

Section 6 – Application to be a Qualified Distributor

Pursuant to Section 54:39-121, Qualified Distributors may delay remittance of the tax precollected by their Suppliers and Permissive Suppliers until up to the 20th day of the month following the removal of taxable products from a terminal by a fuel transportation vehicle. Payments made to Suppliers and Permissive Suppliers **MUST** be made by EFT.

We acknowledge our Suppliers' obligations to precollect tax due on Motor Fuels from us, hold it in trust for New Jersey, and remit the tax precollected no later than the 22nd of the month following the taxable event.

We affirm that:

1. Our company was a licensee in good standing with the State of New Jersey under R. S. 54:39-1 et seq. Our filings and payments were made accurately and timely

— OR —

2. Our company meets the financial responsibility or bonding requirements set forth by the Motor Fuels Tax Act of 2010.

We agree that in order to enable our Suppliers to meet their obligations to the State of New Jersey, we **MUST** remit the amount of tax due to our Suppliers by EFT no later than the 20th day of the month following the taxable event.

Based on the above acknowledgment, affirmation, and agreement, we request that the State of New Jersey recognize the applicant as qualified to delay remittance to Suppliers of tax due until the 20th day of the month following the taxable event. We recognize that as a Qualified Distributor, recognized pursuant to R. S. 54:39-101, that our company, and not our Suppliers, will be liable for penalties and interest in the event that we make remittance to our Suppliers late. We further recognize that a late remittance to our Suppliers will revoke our status as a Qualified Distributor.

QUALIFIED DISTRIBUTOR APPLICATION must be signed by an authorized representative of the company as listed in Section 5 of MFA-1, License Application.

Signature	Title	Printed Name	Date Signed