

**pennsylvania**
DEPARTMENT OF REVENUEBUREAU OF MOTOR AND
ALTERNATIVE FUEL TAXES
PO BOX 280646
HARRISBURG PA 17128-0646**Application for
Additional Motor Carrier
Road Tax/IFTA Decals****BUREAU USE ONLY****Cannot be used to purchase new account or renewal decals.****SECTION A.****APPLICANT INFORMATION**

Business Name (Individual applicants should provide full legal name.)

Account Number

SECTION B.**ADDRESS INFORMATION**

Mailing Address

Telephone Number

County

City

State

ZIP Code

SECTION C.**EXEMPTIONS****Are you requesting IFTA decals for vehicles registered as any of the following? If yes, please include form IFTA-200W with this application.**

A qualified motor vehicle bearing a Pennsylvania farm vehicle registration plate and operated in accordance with the restrictions of Title 75 Pa.C.S. § 1344 (relating to use of farm vehicle plates)

 Yes No

A qualified motor vehicle exempt from registration as a farm vehicle and operated in accordance with the restrictions of Title 75 Pa.C.S. § 1302(10)

 Yes No

An emergency vehicle as defined by Title 75 Pa.C.S. § 102 (relating to definitions)

 Yes No

A vehicle operated by the commonwealth, its political subdivisions, the federal government or its agencies, any foreign country, or any state or political subdivision that grants similar exceptions to publicly owned vehicles registered in this commonwealth

 Yes No

A school bus

 Yes No

A motorbus owned by and registered to a church

 Yes No

An implement of husbandry or commercial implement of husbandry as defined by Title 75 Pa.C.S. § 102 (relating to definitions)

 Yes No

Special mobile equipment as defined by Title 75 Pa.C.S. § 102 (relating to definitions)

 Yes No**SECTION D.****DECALS****Complete the following for additional decals and mail this request along with your check or money payable to the PA Department of Revenue to the address above.****Decal year requested:** *Indicate decal year requested* _____**IFTA Decals** *Number of vehicles that travel in PA and out-of-state* _____ x \$12/set = \$ _____**PA MCRT Decals** *Number of vehicles that travel in PA exclusively* _____ x \$12/set = \$ _____**SECTION E.****MISCELLANEOUS**Do you currently operate any dual-fuel qualified motor vehicles? Yes No If yes, how many? _____

Check the applicable box(es) to indicate the type of product you will be using.

 Diesel Gasoline/Gasohol LNG LP Gas CNG Other _____**SECTION F.****CERTIFICATION****ALL APPLICANTS MUST COMPLETE THIS SECTION**

Applicant purchasing International Fuel Tax Agreement (IFTA) decals agrees to comply with tax reporting, payment, recordkeeping, and license display requirements as specified in the motor carrier road tax (MCRT) statutes and/or the International Fuel Tax Agreement. Applicant further agrees that Pennsylvania may withhold any refunds due if applicant is delinquent on payment of fuel taxes due any member jurisdiction. Failure to comply with these provisions shall be grounds for revocation of license in all member jurisdictions.

Applicant purchasing PA MCRT decals attests that all travel by its qualified motor vehicles is within Pennsylvania, except operations conducted under a valid fuel trip permit, and that all fuel used in such operations is Pennsylvania tax-paid fuel.

Applicant further agrees, under penalty of perjury, that the information provided on this application, to the best of his/her knowledge, is true, accurate and complete. This form must be signed by an owner, partner or corporate officer or by an authorized agent. If signed by an authorized agent, a properly completed Power of Attorney and Declaration of Representative (REV-677) must be attached to this application.

Name

Signature

Title

Date