
APPLICATION FOR MOTOR FUEL LICENSE
Motor Fuel Quality Program - KRS 363.900 to 363.908
January 1 – December 31

License number _____ (to be assigned by office)

Payment Due: \$50.00

Is this a new facility and you are the first owner? Yes No

Is this an existing facility that has not sold motor fuel in the past? Yes No

If previously owned or leased, list the former business name and former owner/operator:

Business Name: _____

Facility Owner/Operator: _____

Provide the date motor fuel sales for your business began or will begin in Kentucky: _____ / _____ / _____
Month Day Year

BUSINESS INFORMATION:

Physical Address (911 address, street, or highway)

Business name: _____

Address: _____

City: _____ *State* _____ *Zip* _____

County: _____ *E-Mail:* _____

Business Phone: (_____) _____ *Fax:* (_____) _____

Owner/Operator: _____ *Contact:* _____

Mailing Address (address specific for business physical location)

Check if the mailing address is same as the physical address. If different, complete the following:

Attention line: _____

Mailing address: _____

City: _____ *State* _____ *Zip* _____

Billing/License Renewal Address

Complete the following if your billing address is different than the business location and/or mailing address.

Billing name: _____

Attention line: _____

Address: _____

City: _____ *State* _____ *Zip* _____

Business Phone: (_____) _____ *Fax:* (_____) _____

Contact: _____ *E-Mail:* _____

PRODUCT INFORMATION

Check each fuel product offered for sale at this business.

***For gasoline products, the fuel grades premium, mid-grade, and regular apply to conventional fuel, ethanol blended fuel, and reformulated fuel. Reformulated fuel applies to areas monitored by EPA.**

- Gasoline:** Premium (91 minimum octane) Reformulated
 Mid-grade (89 minimum octane) Ethanol Blend 10% (E10)
 Regular (86 minimum octane) Other _____
 Racing fuel _____

- Diesel:** Low Sulfur Diesel (LSD)
 Ultra Low Sulfur Diesel (ULSD)
 Off-Road Diesel

- Alternative Fuels:** Biodiesel (B100) E85
 Biodiesel Blend (BXX) E95
 Propane (LPG - Vehicle fuel only) Natural Gas (CNG/LNG)

- Miscellaneous:** Aviation Fuel Kerosene
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Applicant Signature _____ **Date** _____

Printed Name _____ **Title** _____

Mail the completed application with your \$50 check or money order, payable to the Kentucky State Treasurer, to the Division of Regulation & Inspection, 107 Corporate Drive, Frankfort, KY 40601. If you have any questions concerning this application, please contact licensing at (502) 573-0402.