NORTH CAROLINA FUEL TAX APPLICATION



Refiner **Terminal Operator** Supplier **Distributor Importer Exporter** Blender Fuel Alcohol Provider Biodiesel Provider Alternative Fuel Provider Retailer of Alternative Fuel **Bulk-End User of Alternative Fuel** Kerosene Distributor Kerosene Supplier **Dyed Diesel Distributor Transporter**

Who Must Apply

Businesses storing, delivering, or selling fuel in North Carolina may be required to have a license under Chapter 105, Articles 36C, 36D, and Chapter 119, Article 3 of the North Carolina General Statutes. This application must be completed by any person engaging in or conducting business involving fuel in the State of North Carolina who is required to hold one or more of the following licenses: Refiner, Terminal Operator, Supplier, Distributor, Importer, Exporter, Blender, Fuel Alcohol Provider, Biodiesel Provider, Alternative Fuel Provider, Retailer of Alternative Fuel, Bulk End-User of Alternative Fuel, Kerosene Distributor, Kerosene Supplier, Dyed Diesel Distributor, and Transporter.

Important

If this business is a corporation, LLC, LLP, or located in another state or country, the following documents **must be included** with the application before it will be processed:

- 1. Copy of Articles of Incorporation,
- 2. LLC or LLP Operating Agreement,
- 3. Charter, and
- 4. Certificate of Authority To Do Business

Failure to include this documentation with your application will delay the processing of your license.

Bonds

The Excise Tax Division will accept surety bonds on GAS-1212, Motor Fuels Tax Liability Bond, executed by any surety company licensed to do business in North Carolina. A bond secured by an irrevocable letter of credit will be accepted provided that it is executed on the Irrevocable Letter of Credit Template, reproduced on the financial institutions letterhead, by a financial institution authorized to do business in North Carolina.

Bond forms are available in the back of this booklet or they may be obtained on the Department's website at www.ncdor.gov.

Electronic Filing Mandate

Effective July 1, 2008 all returns with schedule data information are required to be filed electronically. There are two (2) options for electronic filing: EDI and web. EDI filing is available to taxpayers licensed as a supplier, terminal operator, or transporter. All returns are available to be filed on the Department's website at www.ncdor.gov. Once licensed, an access code letter will be mailed to the licensee to provide access for electronic filing. Contact the Division at edicoordinator@ncdor.gov to file a supplier, terminal operator, or motor fuels transporter return by EDI.

License Types

<u>Refiner</u> means any person who owns, operates or controls a facility used to process crude oil, unfinished oils, natural gas liquids, or other hydrocarbons into motor fuel and from which motor fuel may be removed by pipeline, vessel, or at a rack. In addition, a person who produces more than 6,000,000 gallons of fuel alcohol or biodiesel during a calendar year is classified as a refiner. A refiner who transports any motor fuel for hire by means of a transport truck must also obtain a license as a Motor Fuel Transporter. <u>GAS-1207</u>, <u>Motor Fuels Refiner Return</u>, is required to be filed by all refiners and is due by the 22nd day following the end of the month.

A bond in the amount of \$2,000,000 is required to obtain a refiner license.

<u>Terminal Operator</u> means a person who owns, operates or controls a motor fuel storage and distribution facility that has been assigned a terminal control number by the Internal Revenue Service, is supplied by pipeline or marine vessel, and from which motor fuel, jet fuel, or aviation gasoline may be removed at a rack. <u>GAS-1204</u>, <u>Monthly Terminal Operator Return</u>, is required to be filed by all terminal operators and is due by the 22nd day following the end of the month. <u>GAS-1209</u>, <u>Annual Terminal Operator Return</u>, is required to be filed by in-state terminal operators only and is due by February 14th of each year.

A bond in the amount of \$2,000,000 is required to obtain a terminal operator license.

<u>Supplier</u> means a position holder or a person who receives motor fuel pursuant to a two-party exchange and is required to collect and remit tax on motor fuel removed from a terminal/refinery rack. There are three types of supplier licenses: elective, permissive, and in-state only. The applicant is required to identify the license type based on their activity. **A supplier who**

transports any motor fuel for hire by means of a transport truck must also obtain a license as a Motor Fuel Transporter. <u>Gas-1202</u>, <u>Motor Fuels Supplier Return</u>, is required to be filed by all suppliers and is due by the 22nd day following the end of the month.

A bond in the amount of \$2,000,000 is required to obtain a supplier license.

<u>Distributor</u> means a person who acquires motor fuel from a supplier or from another distributor for subsequent sale. This license is optional for distributors who purchase motor fuel in North Carolina for distribution in the State. A distributor who purchases motor fuel from an elective or permissive supplier at an out-of-state terminal for import into North Carolina or purchases motor fuel from an elective or permissive supplier at an in-state terminal for export from North Carolina is required to obtain a distributor license. A distributor who transports any motor fuel for hire by means of a transport truck must also obtain a license as a Motor Fuel Transporter. Distributors may file <u>Gas-1239</u>, <u>Bulk Plant Exporter Return</u>, if exports are made from the bulk plant. <u>Gas-1259</u>, <u>Motor Fuels Backup Tax Return</u>, is required to be filed to report all motor fuel that was diverted to a state other than that which appears on the bill of lading. These returns are due by the 22nd day following the end of the month.

A bond in the amount of two times the average monthly motor fuel tax liability, minimum \$2,000 maximum \$500,000, is required to obtain a distributor license.

Importer means any person engaged in the practice of importing motor fuel. Motor fuel delivered into North Carolina from out-of-state by or for the seller constitutes an import by the seller. Motor fuel delivered into North Carolina from out-of-state by or for the purchaser constitutes an import by the purchaser. There are three types of importers: Bonded, Occasional and Tank wagon. A bonded importer is a person, other than a supplier, who imports motor fuel removed from a terminal located in another state for which that state does not require the seller of the fuel to collect motor fuel tax on the removal either at that state's rate or the rate of the destination state; or the supplier is neither elective nor permissive. An occasional importer is any of the following: a distributor that imports motor fuel on an average basis of no more than once a month, a bulk-end user that acquires motor fuel for import from a bulk plant and is not required to be licensed as a bonded importer, or a distributor that imports motor fuel for use in a race car. A tank wagon importer is a person who imports, by means of a tank wagon only, motor fuel that is removed from a terminal or a bulk plant located in another state. An importer who transports any motor fuel for hire by means of a transport truck must also obtain a license as a Motor Fuel Transporter. Gas-1219, Motor Fuels Importer Return, is required to be filed by all importers. This return is due by the 22nd day following the end of the month for Bonded Importers and Tank Wagon Importers. Occasional Importers must file this return by the 3rd day following the end of the month.

A bond in the amount of two times the average monthly motor fuel tax liability, minimum \$2,000 maximum \$500,000, is required to obtain an occasional or tank wagon importer license. A bond in the amount of \$2,000,000 is required to obtain a bonded importer license.

<u>Exporter</u> means any person engaged in the practice of exporting motor fuel. Motor fuel delivered out-of-state by or for the seller constitutes an export by the seller. Motor fuel delivered out-of-state by or for the purchaser constitutes an export by the purchaser. An exporter who transports any motor fuel for hire by means of a transport truck must also obtain a license as a Motor Fuel Transporter. There are no reporting requirements for this license type.

There are no bonding requirements for obtaining an exporter license.

<u>Blender</u> means any person who produces a mixture composed of gasoline or diesel fuel and another liquid, other than an additive, that can be used as a fuel in a highway vehicle. The commingling of products during transportation in a pipeline is not considered blending. A blender who transports any motor fuel for hire by means of a transport truck must also obtain a license as a Motor Fuel Transporter. <u>Gas-1260</u>, <u>Blender Return</u>, is required to be filed by all blenders and is due by the 22nd day following the end of the month.

A bond is required for a blender license only if the applicant's average expected annual tax liability is at least \$2,000. When a bond is required, the bond amount is two times the average monthly motor fuel tax liability, minimum \$2,000 maximum \$500,000.

<u>Fuel Alcohol Provider</u> means a person who either produces an average of no more than 500,000 gallons of fuel alcohol per month during a calendar year, or a person who imports fuel alcohol outside the terminal transfer system by means of a marine vessel, a transport truck, a railroad tank car, or a tank wagon. **A fuel alcohol provider who transports any motor fuel for hire by means of a transport truck must also obtain a license as a Motor Fuel Transporter.** <u>Gas-1264</u>, <u>Fuel Alcohol Provider Return</u>, is required to be filed by all fuel alcohol providers and is due by the 22nd day following the end of the month.

A bond is required for a fuel alcohol provider license only if the applicant's average expected annual tax liability is at least \$2,000. When a bond is required, the bond amount is two times the average monthly motor fuel tax liability, minimum \$2,000 maximum \$500,000.

<u>Biodiesel Provider</u> means a person who either produces an average of no more than 500,000 gallons of biodiesel per month during a calendar year, or a person who imports biodiesel outside the terminal transfer system by means of a marine vessel, a transport truck, a railroad tank car, or a tank wagon. A biodiesel provider who transports any motor fuel for hire by means of a transport truck must also obtain a license as a Motor Fuel Transporter. <u>Gas-1264</u>, <u>Biodiesel Provider Return</u>, is required to be filed by all biodiesel providers and is due by the 22nd day following the end of the month.

A bond is required for a biodiesel provider license only if the applicant's average expected annual tax liability is at least \$2,000. When a bond is required, the bond amount is two times the average monthly motor fuel tax liability, minimum \$2,000 maximum \$500,000.

Alternative Fuel Provider means any person who does one or more of the following:

- 1. Acquires alternative fuel for sale or delivery to a bulk end user or a retailer;
- 2. Maintains storage facilities for alternative fuel, part or all of which the person uses or sells to someone other than a bulk end-user or a retailer to operate a highway vehicle;
- 3. Sells alternative fuel and uses part of the fuel acquired for sale to operate a highway vehicle by means of a fuel supply line from the cargo tank of the vehicle to the engine of the vehicle; or,
- 4. Imports alternative fuel to this State, by a means other than the usual tank or receptacle connected with the engine of a highway vehicle, for use by that person to operate a highway vehicle.

<u>Gas-1252</u>, <u>Alternative Fuels Provider Return</u>, is required to be filed by all alternative fuel providers and is due by the 22nd day following the end of the month.

A bond in the amount of two times the average monthly motor fuel tax liability, minimum \$2,000 maximum \$500,000, is required to obtain an alternative fuel provider license.

<u>Retailer of Alternative Fuel</u> means a person who maintains storage facilities for alternative fuel and who sells the fuel at retail or dispenses the fuel at a retail location to operate a highway vehicle. <u>Gas-1258</u>, <u>Retailer of Alternative Fuels Return</u>, is required to be filed by all retailers of alternative fuel and is due by the last day of the month following the end of the quarter.

A bond is required for a retailer of alternative fuel license only if the applicant intends to store highway and nonhighway alternative fuel in the same storage facility. When a bond is required, the bond amount is two times the average monthly motor fuel tax liability, minimum \$2,000 maximum \$500,000.

<u>Bulk End-user of Alternative Fuel</u> means a person who maintains storage facilities for alternative fuel and uses part or all of the stored fuel to operate a highway vehicle. <u>Gas-1254</u>, <u>Bulk End-user of Alternative Fuels Return</u>, is required to be filed by all bulk end-users of alternative fuel and is due by the last day of the month following the end of the quarter.

A bond is required for a bulk end-user of alternative fuel license only if the applicant intends to store highway and nonhighway alternative fuel in the same storage facility. When a bond is required, the bond amount is two times the average monthly motor fuel tax liability, minimum \$2,000 maximum \$500,000.

Kerosene Distributor means any person who acquires kerosene from any of the following licensees for subsequent sale:

- 1. A supplier required to be licensed under Article 36C,
- 2. A kerosene supplier, or
- 3. Another kerosene distributor.

There are no reporting requirements for this license type.

The amount of bond required of a kerosene distributor licensed under G.S. 119-15.1 is based on the kerosene distributor's average monthly taxable sales and use of kerosene in North Carolina as follows:

From	1 to	60,000	gallons per month	\$ 500
From	60,001 to	100,000	gallons per month	1,000
From	100,001 to	300,000	gallons per month	2,500
From	300,001 to	600,000	gallons per month	5,000
From	600,001 to	900,000	gallons per month	7,500
From	900,001 to	1,200,000	gallons per month	10,000
From	1,200,001 to	1,500,000	gallons per month	12,500
From	1,500,001 to	1,800,000	gallons per month	15,000
From	1,800,001 to	2,000,000	gallons per month	17,500
From	2,000,001 and	d over	gallons per month	20,000

Kerosene Supplier means any person who does either of the following:

- 1. Supplies both kerosene and motor fuel and is required to be licensed under Article 36C, or
- 2. Maintains storage facilities for kerosene to be used to fuel an airplane and is not required to be licensed as a supplier under Article 36C.

<u>Gas-1288</u>, <u>Kerosene Supplier Return</u>, is required to be filed by all kerosene suppliers and is due by the 22nd day following the end of the month.

The amount of bond required of a kerosene supplier licensed under G.S. 119-15.1 is based on the kerosene supplier's average monthly taxable sales and use of kerosene in North Carolina as follows:

From	1 to	60,000	gallons per month	\$ 500
From	60,001 to	100,000	gallons per month	1,000
From	100,001 to	300,000	gallons per month	2,500
From	300,001 to	600,000	gallons per month	5,000
From	600,001 to	900,000	gallons per month	7,500
From	900,001 to	1,200,000	gallons per month	10,000
From	1,200,001 to	1,500,000	gallons per month	12,500
From	1,500,001 to	1,800,000	gallons per month	15,000
From	1,800,001 to	2,000,000	gallons per month	17,500
From	2,000,001 and	lover	gallons per month	20,000

Dyed Diesel Fuel Distributor means any person who acquires dyed diesel fuel from either of the following:

- 1. A person who is not required to be licensed under Article 36C and who maintains storage facilities for dyed diesel fuel to be used for nonhighway purposes, or
- 2. Another dyed diesel fuel distributor.

<u>Gas-1219</u>, <u>Motor Fuels Importer Return</u>, is required to be filed by all dyed diesel fuel distributors who import dyed diesel fuel into North Carolina. This return is due by the 22nd day following the end of the month and should be reported on a Tank Wagon Importer Return.

The amount of bond required of a dyed diesel fuel distributor licensed under G.S. 119-15.1 is based on the dyed diesel fuel distributor's average monthly taxable sales and use of dyed diesel in North Carolina as follows:

From	1 to	60,000	gallons per month	\$	500
From	60,001 to	100,000	gallons per month		1,000
From	100,001 to	300,000	gallons per month		2,500
From	300,001 to	600,000	gallons per month		5,000
From	600,001 to	900,000	gallons per month		7,500
From	900,001 to	1,200,000	gallons per month	•	10,000
From	1,200,001 to	1,500,000	gallons per month	•	12,500
From	1,500,001 to	1,800,000	gallons per month	•	15,000
From	1,800,001 to	2,000,000	gallons per month	•	17,500
From	2,000,001 and	dover	gallons per month	2	20,000

<u>Transporter</u> means any person who engages in the business of transporting reportable petroleum products for hire by pipeline, marine vessel, railroad tank car, or transport truck. All movements of fuel, whether interstate or intrastate, must be reported. Please note: Transporting reportable petroleum products by means of a tank wagon is not required to be reported on the transporter return. <u>Gas-1301</u>, <u>Motor Fuels Transporter Return</u>, is required to be filed by all motor fuel transporters and is due by the 22nd day following the end of the month.

There are no bonding requirements for obtaining a transporter's license.

Registration Application Motor Fuel Tax License

North Carolina Department of Revenue

Street or P.O. Box City State Zip Code County Location of Records Street City State Zip Code State Sta	Part 1. Identifying Informa) II O O F :		Other/Identifi
Attach copy of Articles of Incorporation, LLC or LLP Operating Agreement, Charter and Certificate of Authority To Do Business Legal Name Items (DBA Name) Business Location Street					
Legal Name Legal Name Business Location (Not P.O. Box Number) City State Zip Code County Mailing Address Street or P.O. Box City State Zip Code County State Zip Code County Location of Records Street City State Zip Code Licensing Contact Name Telephone Number Telephone Number Telephone Number Telephone Number Street or P.O. Box City State Zip Code Licensing Contact Name Telephone Number Fax Number 10. Preparer Mailing Address Name Street or P.O. Box City State Zip Code Litensing Contact Name Telephone Number Fax Number 10. Preparer Mailing Address Name Street or P.O. Box City State Street or P.O. Box City State Member Part 2. Ownership Information Each corporate officer, principal, manager, partner or owner must complete the information requested below. If needed, attach additional sheet(s) to provide the information requested in this application. (Fill in applicable circle for title) President Name Fax Number Name Street or P.O. Box City State Name N					
Business Location Street					
Business Location (Not P.O. Box Number) City State Zip Code County Mailing Address Street or P.O. Box City State Zip Code Licensing Contact Name Fax Number Telephone Number Fax Number Description Number Street or P.O. Box City State Zip Code Telephone Number Street or P.O. Box City State Zip Code Telephone Number Fax Number Description Number Street or P.O. Box City State Zip Code Email Address 1. Federal Employer's Identification Number (FEIN) Part 2. Ownership Information Each corporate officer, principal, manager, partner or owner must complete the information requested below. If needed, attach additional sheet(s) to provide the information requested in this application. Fill in applicable circle for title) President Manager Member Partner Owner Full Name (First, Middle, Last) Residence Address (Street address, City, State, and Zip code) 1. Telephone (Residence) 4. Telephone (Business) Social Security Number 6. Driver's License Number & State	. Legal Name				
City State Zip Code County	. Trade Name (DBA Name)				
State	Business Location	Street			
City State Zip Code 5. Email Address 7. Location of Records Street	(Not P.O. Box Number)		State Zi	p Code	County
Street City State Zip Code 3. Licensing Contact Name Telephone Number Fax Number 7. Filling Contact Name Telephone Number Fax Number 10. Preparer Mailling Address Name Street or P.O. Box City State Zip Code Email Address 1. Federal Employer's Identification Number (FEIN) Part 2. Ownership Information Each corporate officer, principal, manager, partner or owner must complete the information requested below. If needed, attach additional sheet(s) to provide the information requested in this application. [Fill in applicable circle for title) President Manager Member Partner Owner I. Full Name (First, Middle, Last) 2. Residence Address (Street address, City, State, and Zip code) 4. Telephone (Business) 5. Social Security Number 6. Driver's License Number & State	5. Mailing Address				
Street CityStateZip Code CityStateZip Code CityStateZip Code Telephone NumberFax Number		City	State	Zip Code	
City State Zip Code 3. Licensing Contact Name Telephone Number Fax Number 9. Filling Contact Name Fax Number 10. Preparer Malling Address Name Street or P.O. Box City State Zip Code Email Address 1. Federal Employer's Identification Number (FEIN) Part 2. Ownership Information Each corporate officer, principal, manager, partner or owner must complete the information requested below. If needed, attach additional sheet(s) to provide the information requested in this application. [Fill In applicable circle for title) President Manager Member Partner Owner 2. Residence Address (Street address, City, State, and Zip code) 3. Telephone (Residence) 4. Telephone (Business) 4. Telephone (Business) 5. Social Security Number 6. Driver's License Number & State	3. Email Address				
Second Contact Name	7. Location of Records	Street			
Second Contact Name		City	State	Zip Code	
Filing Contact Name	3. Licensing Contact				
Telephone Number		Telephone Number		Fax Number _	
Name	9. Filing Contact	Name			
Street or P.O. Box City State Zip Code Email Address 1. Federal Employer's Identification Number (FEIN) Part 2. Ownership Information Each corporate officer, principal, manager, partner or owner must complete the information requested below. If needed, attach additional sheet(s) to provide the information requested in this application. (Fill in applicable circle for title)		Telephone Number		Fax Number	
City). Preparer Mailing Address	Name			
Email Address 1. Federal Employer's Identification Number (FEIN) Part 2. Ownership Information Each corporate officer, principal, manager, partner or owner must complete the information requested below. If needed, attach additional sheet(s) to provide the information requested in this application. (Fill in applicable circle for title)					
Part 2. Ownership Information Each corporate officer, principal, manager, partner or owner must complete the information requested below. If needed, attach additional sheet(s) to provide the information requested in this application. (Fill in applicable circle for title) President Manager Partner Owner Full Name (First, Middle, Last) 2. Residence Address (Street address, City, State, and Zip code) 3. Telephone (Residence) 4. Telephone (Business) 5. Social Security Number 6. Driver's License Number & State		City	State	Zip Code	
Part 2. Ownership Information Each corporate officer, principal, manager, partner or owner must complete the information requested below. If needed, attach additional sheet(s) to provide the information requested in this application. (Fill in applicable circle for title) President Manager Partner Owner Full Name (First, Middle, Last) 2. Residence Address (Street address, City, State, and Zip code) 4. Telephone (Business) 5. Social Security Number 6. Driver's License Number & State		Email Address			
Each corporate officer, principal, manager, partner or owner must complete the information requested below. If needed, attach additional sheet(s) to provide the information requested in this application. (Fill in applicable circle for title)	Federal Employer's Identification	ation Number (FEIN)			
Each corporate officer, principal, manager, partner or owner must complete the information requested below. If needed, attach additional sheet(s) to provide the information requested in this application. (Fill in applicable circle for title)	Part 2. Ownership Informa	tion			
(Fill in applicable circle for title) President Manager Member Partner Owner Full Name (First, Middle, Last) Residence Address (Street address, City, State, and Zip code) 4. Telephone (Business) Social Security Number 6. Driver's License Number & State	Each corporate off	ficer, principal, manager, partner			
2. Residence Address (Street address, City, State, and Zip code) 3. Telephone (Residence) 4. Telephone (Business) 5. Social Security Number 6. Driver's License Number & State 1 certify that, to the best of my knowledge, the information contained on Lines 1 through 6 is correct.					
3. Telephone (Residence) 4. Telephone (Business) 5. Social Security Number 6. Driver's License Number & State 6. I certify that, to the best of my knowledge, the information contained on Lines 1 through 6 is correct.	. Full Name (First, Middle, Las	st)			
3. Telephone (Residence) 4. Telephone (Business) 5. Social Security Number 6. Driver's License Number & State I certify that, to the best of my knowledge, the information contained on Lines 1 through 6 is correct.	Death Art (5)	addings Of Other 17			
5. Social Security Number 6. Driver's License Number & State I certify that, to the best of my knowledge, the information contained on Lines 1 through 6 is correct.	Kesidence Address (Street a	adaress, City, State, and Zip code)			
5. Social Security Number 6. Driver's License Number & State I certify that, to the best of my knowledge, the information contained on Lines 1 through 6 is correct.	3. Telephone (Residence)		4. Telephone (Bus	iness)	
I certify that, to the best of my knowledge, the information contained on Lines 1 through 6 is correct.			, 12113 (230	,	
I certify that, to the best of my knowledge, the information contained on Lines 1 through 6 is correct.	5. Social Security Number		6. Driver's Licens	e Number & State	
	•				
	I certify that, to the best of	f my knowledge, the information	contained on Lines 1	1 through 6 is corre	ect.
. Εισματαίο μετροπημοτισρό τοι σοπρατίου που ραμίκον παίστε	-				

(Fill in applicable circle for title)	○ Vice-President	O Ma	nager	Member	O Partner	O Co-Owner
8. Full Name (First, Middle, Last)						
9. Residence Address (Street address, Cit	y, State, and Zip code)					
10. Telephone (Residence)		11.	Telepho	ne (Business)		
12. Social Security Number		13.	Driver's	s License Number	& State	
(Fill in applicable circle for title)	Secretary	O Mai	nager	Member	O Partner	
14. Full Name (First, Middle, Last)						
15. Residence Address (Street address, C	ity, State, and Zip code)					
16. Telephone (Residence)		17.	Telepho	ne (Business)		
18. Social Security Number		19.	Driver's	License Number	& State	
(Fill in applicable circle for title)	○ Treasurer	O Mar	nager	O Member	O Partner	
20. Full Name (First, Middle, Last)21. Residence Address (Street address, Cited address)	ity, State, and Zip code)					
22. Telephone (Residence)		23.	Telepho	ne (Business)		
24. Social Security Number	-	25.	Driver's	License Number	& State	
26. List full name of directors (Attach addition	nal sheets if necessary.)	Ad	ddress <i>(Ma</i>	ailing address, City	, State, and Zip cod	de)
27. List full name of shareholders with control	olling interest in corporati	on Ac	ldress <i>(Ma</i>	illing address, City	, State, and Zip coo	le)
If there are 15 or less shareholders, all share ownership have a controlling interest.	cholders have a controllin	g interest.	If there a	e more than 15 sh	nareholders, shareh	olders with 5% or more
28. Has the corporation, LLC, LLP, partnersl been convicted of any felony or misdemeand Yes No (If yes, please expense)	or involving motor fuels?	bers, contr	olling shar	eholders of the co	rporation or owners	of the business

29. Name of bank or financial institution that	you will use to	o pay the	e motor fuel tax:					
Name			_ Bank Account Numbe	r				
Street or P.O. Box								
City		State _		Zip Code				
Telephone Number			Fax Nui	mber				
30. List other business licenses or permits h	eld by the cor	poration,	LLC, partnership, or pro	prietorship				
31. If your business is based in another state	e, list name, a	ddress, t	elephone number, and fa	ax number of the N	North Carolina registered agent.			
Name								
Street or P.O. Box								
City	;	State		Zip Code				
Telephone Number			Fax Nui	mber				
32. Indicate the states in which you do busin	ess.		Date business started in ch a license is requested					
34. Has the corporation, LLC, LLP, partnersh	nip, or propriet	torship n	ow or in the past conduc	ted any other busi	nesses using a DBA?			
Yes No (If yes, pleas	e list DBA us	ed.)						
35. Does the corporation, LLC, LLP, partners	ship, or proprie	etorship (own any property in this	state?				
Yes No (If yes, please	describe.)							
36. Does any officer, director, member, contribute or any other state (e.g., other refiners, s	olling shareho	older, par ributors,	tner, or owner own or co	ntrol any petroleu retail outlets, term	m business which operates in this in this operations, etc.)?	i		
Yes No (If yes, please	explain.)							
37. Does any officer, director, member, contr in this state or any other state?	olling shareho	older, par	tner, or owner own or co	ntrol any petroleu	m transport equipment which ope	rates		
○ Yes ○ No (If yes, please	explain.)							
38. List any current or previous officer, direct the last seven years, a North Carolina motor		controlling	g shareholder, partner, o	r owner of any ent	ity who holds or has held,	within		
Please provide the information reques the right for each person listed.	sted to	State	Account Number		Relationship to account holder			
39. If business was acquired, from whom wa	e it acquired?							
List type of fuel and number of gallons in	the storage to	anks at t	he time of purchase. <i>(At</i>		eets if necessary.)			
Propane	Aviation Low Sulfur Gasoline Dyed Diesel							
Gasoline	Jet Fuel			Undyed Biodiesel				
Dyed Kerosene	Undyed Kerosen	e		Dyed Biodiesel				
Fuel Alcohol	Low Sulf Diesel	fur						
Gasohol	High Sul Dyed Die							

Part 3. Business Operations Information

List the type(s) of license for which you are applying. Complete the section(s) below for license type(s) requested. (See instructions.)

Refiner License		List Federal 637 Number:						
Yes No	1.	Do you have any petroleum pro	oduct refinin	g capabilities? List each	state.			
		List the locations of all refinerie eets if necessary.)	s in North C	Carolina from which you in	tend to refine petr	oleum product	s. (Attaci	h additional
	3.	Estimated monthly gallons of r	efined petro	leum products disbursed	 from in-state refine	eries only.		
		Gasoline		Dyed Kerosene		Propane		
		Low Sulfur Diesel		Jet Fuel		Undyed Biodiesel		
		High Sulfur Diesel		Aviation Gasoline		Dyed Biodiesel		
		Undyed Kerosene		Fuel Alcohol				
◯ Yes ◯ No	4.	Do you lease storage facilities	in a termina	l in North Carolina?				
	5.	From whom and where do you	lease the st	torage facilities? (Attach a	additional sheets if	necessary.)		
Yes No	6.	Do you plan to import petroleu	m products	into North Carolina?				
	7.	Indicate the type of petroleum	products imp	ported into North Carolina	ı.			
		Gasoline	0	Undyed Kerosene	_	on Gasoline	0	Undyed Biodiesel
		Low Sulfur Diesel	0	Dyed Kerosene Jet Fuel	Fuel A		0	Dyed Biodiesel
	Ω	 High Sulfur Diesel Indicate the means of transpor 	t for this imr		O Propa	ne		
	0.	Seagoing Vessel/Barge		Transport Truck	○ Tanl	k Wagon		
		O Pipeline	O	Railroad Tank Car		er - Describe		
	9.	List the states from which you in	nport petrole	um products and your licer	nse number in those	e states. <i>(Attacl</i>	h additior	nal sheets if necessary
Yes No		. Do you plan to export petrole						
	11	Indicate the type of petroleum			•	0 "		
		GasolineLow Sulfur Diesel		Undyed Kerosene Dyed Kerosene	_	on Gasoline Johol		Undyed Biodiesel Dyed Biodiesel
		High Sulfur Diesel	0	Jet Fuel	O Propa		0	byed blodiesei
Terminal Operato	or L	icense List Federal 637	Number:					
Yes No	12	. Do you own or operate a term	ninal in North	n Carolina?				
Yes No	13	Do you own or operate a term	ninal in anoth	ner state from which petro	leum products are	delivered to N	Iorth Car	olina?
	14	List the physical terminal adding product with a North Carolina				N), for each te	rminal se	elling petroleum
	15	List all position holders/suppli	ers owning	product in your terminal(s). (Attach additiona	al sheets if ned	essary.)	

	16.	Indicate the type of petroleum pro	oducts i	mported into North	Carolina.				
		Gasoline	\circ	Undyed Kerosen	ie O	Aviation	n Gasoline	\circ	Undyed Biodiesel
		Low Sulfur Diesel	0	Dyed Kerosene	\circ	Fuel Ald	cohol	\circ	Dyed Biodiesel
		High Sulfur Diesel	0	Jet Fuel	\circ	Propan	е		
Supplier Licen	se	List Federal 637 Number:							
○ Yes ○ No	17	Do you lease storage facilities in	a termir	nal in North Carolir	na?				
0.00 0.10						4 . 4 . 4			
	18.	From whom and where do you le	ase the	storage facilities?	(Attach additional	sneets if	necessary.)		
○Yes ○ No	19.	Do you plan to import petroleum	product	s into North Carolii	na?				
	20.	Indicate the type of petroleum pro	ducts in	mported into North	Carolina.				
		Gasoline	0	Undyed Kerosen	e O	Aviation	n Gasoline		Undyed Biodiesel
		O Low Sulfur Diesel	0	Dyed Kerosene	0	Fuel Ald	cohol	0	Dyed Biodiesel
		High Sulfur Diesel	0	Jet Fuel	0	Propan	e		•
	21.	Indicate the means of transport for	or this in	nported product.		·			
		Seagoing Vessel/Barge	0	Transport Truck	C	Tank '	Wagon		
		O Pipeline	Ö	Railroad Tank Ca	ar C		- Describe		
	22	-	ort notro					ch additic	anal chaets if necessa
	22.	List the states from which you impo	ort petro	eum products and	your license numb	er in mose	states. (Attac	ii addillo	riai srieets ii riecessa
					_				
	23.	Estimate the number of taxable g	allons t		used in North Car	olina durir	ng an averag	e month.	
		Gasoline		Dyed Kerosene			Propane		
		Low Sulfur		1 -			Undyed		
		Diesel		Jet Fuel			Biodiesel		
		High Sulfur		Aviation			Dyed		
		Diesel		Gasoline			Biodiesel		
		Undyed		Fuel					
		Kerosene		Alcohol					
OV:- O N:	0.4	5							
Yes No		Do you plan to export petroleum							
	25	Indicate the type of petroleum pro	oducts e			A! - 4!	0 11		
		Gasoline		Undyed Kerosen	e O		n Gasoline	0	Undyed Biodiesel
		O Low Sulfur Diesel	0	Dyed Kerosene	0	Fuel Ald		\circ	Dyed Biodiesel
		 High Sulfur Diesel 	0	Jet Fuel	0	Propan	е		
	26.	Indicate the means of transport for	or this e	xported product.					
		 Seagoing Vessel/Barge 	0	Transport Truck	0	Tank W	agon agon		
		O Pipeline	\circ	Railroad Tank Ca	ır 🔘	Other -	Describe _		
	27.	List the destination states for export	ed petro	leum products and	the license number	in those s	tates. (Attach	additiona	al sheets if necessary.
		-							
○ Yes ○ No	28	. Are you a shipper of record on or	ne of the	commercial pipel	ines serving North	Carolina	?		
	29.	What other types of operations w	ill you b	e engaged in?					
		Exchanges	\bigcirc	Direct shipments		Othe	r - Describe		
		Sales on consignment	$\tilde{\circ}$	Sell petroleum p		Outo	Describe		
		Operate service stations		Trade petroleum					
		Operate service stations		rrade petroleum	i products				
	30.	Provide the following information			m you purchase n	notor fuel	and exchang	e partner	rs from whom you
		receive motor fuel. (Attach additi	onal sh	eets if necessary.)					
		N -		Supplier Exchange Partner	Chinalas/D-II	.m. D. ! 1		_	ada4
		<u>Name</u>		Supplie Exchang Partner	Shipping/Delive	ery Point		Pro	<u>oduct</u>
							_		
				_ O O					

Supplier Election (Tax at the Rack)

Suppliers may elect to collect North Carolina's excise tax on imported fuel from out-of-state terminals. Once this election is made, suppliers must collect excise taxes on all reportable petroleum products removed from out-of-state terminals which reflect North Carolina as the destination state on the shipping documents.

g	31.		plier is required	are requesting. I to be licensed in North rminals that have North (or fuel ex	cise tax on fuel
		O Permissive S	upplier is an o	out-of-state supplier that it el excise tax on fuel impo	is not required	d to be licensed in No		
				quired to be licensed in N state terminals that have			o collect	motor fuel excise tax
Distributor Lice	ense	List Federal 637 Num	ber <i>(If applicab</i>	le):				
Yes No		Do you maintain bulk stor	•					
		Where is your bulk storag Fuel Storage Capacity:	Above Gr	ound		Below Ground _		
		If no bulk storage facility i						
Yes No	36.	Do you plan to import petr	oleum products	s into North Carolina?				
	37.	Indicate the type of petrole	eum products ir	nported into North Caroli	ina.			
		Gasoline	0	Undyed Kerosene	0	Aviation Gasoline	0	Undyed Biodiesel
		Low Sulfur Diesel	0	Dyed Kerosene	~	Fuel Alcohol	\circ	Dyed Biodiesel
		High Sulfur Diesel	0	Jet Fuel	0	Propane		
	38.	Indicate the means of tran				T		
		Seagoing Vessel/BarPipeline	ge	Transport Truck Railroad Tank Car		Tank Wagon Other - Describe		
	00	List the states from which ye				•		
	40.	Estimate the number of ta: Gasoline Low Sulfur	xable gallons tl	Dyed Kerosene	n North Caroli	na during an average Propane Undyed	e month.	
		Diesel		Jet Fuel		Biodiesel		
		High Sulfur Diesel		Aviation Gasoline		Dyed Biodiesel		
		Undyed Kerosene		Fuel Alcohol				
Yes No	41.	Do you plan to export petr	oleum products	s out of North Carolina?				
	42.	Indicate the type of petrole	eum products e	xported from North Caro	lina.			
		Gasoline	0	Undyed Kerosene	_	Aviation Gasoline	0	Undyed Biodiesel
		Low Sulfur Diesel	0	Dyed Kerosene	0	Fuel Alcohol	0	Dyed Biodiesel
	40	High Sulfur Diesel	0	Jet Fuel	0	Propane		
	43.	Indicate the means of tran				Tank Wagan		
		Seagoing Vessel/BarPipeline	ge O	Transport Truck Railroad Tank Car	0	Tank Wagon Other - Describe		
	44.	List the destination states for	r exported petro		ense number i	•	n addition	al sheets if necessary.)
Yes No		Are you a shipper of recor What other types of opera			erving North C	Carolina?		
		Exchanges	0	Direct shipments	0	Other - Describe		
		O Sales on consignme	nt O	Sell petroleum product	S			
		Operate service stat		Trade petroleum produ	ıcts			

	47.	Provide the following information a receive motor fuel. (Attach addition				otor fuels and exchan	ge partne	rs from whom you
		<u>Name</u>		Supplier Supplier Exchange Partner	Shipping/Deliver	y Point	Prod	<u>luct</u>
	,			0 0				
	,				-			
				0 0				
Importer Licens	se	List Federal 637 Number (If applic	able):					
∩ Yes ∩ No	48	Do you maintain bulk storage facil	ities in l	North Carolina	?			
0 100 0 110		Where will your bulk storage be lo						
	50.	Fuel Storage Capacity: Ab	ove Gr	ound		_ Below Ground .		
	51.	If no bulk storage facility is owned	, explaiı	n storage arraı	ngements			
O								
Yes No		Do you plan to import petroleum p						
Yes No		Do you plan to import racing fuel in						•
Yes No		Do you plan to import petroleum p			•	plant located in anothe	er state?	
	55.	Indicate the type of petroleum prod	ducts in			Aviation Casalina		Headers of Displicated
		Gasoline Low Sulfur Diesel	0	Undyed Kero Dyed Kerose		Aviation Gasoline Fuel Alcohol	0	Undyed Biodiesel Dyed Biodiesel
		High Sulfur Diesel	0	Jet Fuel		Propane	0	Dyed Blodlesei
	56	Indicate the means of transport for	r this im		t	Гюрапе		
	00.	Seagoing Vessel/Barge		Transport Tru		Tank Wagon		
		O Pipeline	Ŏ	Railroad Tank		Other - Describe		
	57.	List the states from which you import	petrole	um products an	d your license number	in those states. (Attach	additional	sheets if necessary.)
		,	•	·	•	•		• /
	58.	Estimate the number of taxable ga	allons th		orted into North Caroli	na during an average	month.	
		Gasoline		Dyed Kerosene		Propane		
		Low Sulfur				Undyed		
		Diesel		Jet Fuel		Biodiesel		
		High Sulfur		Aviation		Dyed		
		Diesel		Gasoline		Biodiesel		
		Undyed Kerosene		Fuel Alcohol				
		Reference		7 (1001101				
Yes No		Do you plan to export petroleum p						
	60.	Indicate the type of petroleum prod	ducts ex	•		Aviation Capalina		Unaber d Diadiana
		GasolineLow Sulfur Diesel		Undyed Kerose Dyed Kerose		Aviation Gasoline Fuel Alcohol		Undyed Biodiesel Dyed Biodiesel
		High Sulfur Diesel	0	Jet Fuel		Propane		Dyeu bloulesel
	61	Indicate the means of transport for	r this ex		t	riopane		
	01.	Seagoing Vessel/Barge		Transport Tru		Tank Wagon		
		O Pipeline	Ö	Railroad Tank		Other - Describe		
	62.	List the destination states for exporte	d petrole	eum products a	nd your license numbe		h additiona	al sheets if necessary
Yes No	63.	Are you a shipper of record on one	e of the	commercial pi	pelines serving North	Carolina?		

	64.	What other types of operations w	ill you be	e engage	ed in?					
		 Exchanges 		Direct	shipment	S	Oth	er - Describe		
		Sales on consignment	\circ	Sell pe	troleum p	oroducts				
		Operate service stations	\circ	Trade p	oetroleun	n products				
	65.	Provide the following information	about su	uppliers t	from who	m you pur	chase motor fue	l and exchange	partners	s from whom you
		receive motor fuel. (Attach addit	ional she		cessary.,)				
		Nama		Supplier	ang	Chinnin	g/Delivery Poin		Dro	duct
		<u>Name</u>		Sup	Exchange Partner	Shipping	g/Delivery Foli	<u>ıı.</u>	<u> </u>	<u>auct</u>
				. 0	0					
				\bigcirc	\bigcirc					
				. 0	\circ					
Exporter License		List Federal 637 Number (If app	olicable):							
OVec O Ne	66	Do you maintain bulk storage foo	ilitica in N	North Co	rolino?					
Yes No		Do you maintain bulk storage fac Where will your bulk storage be le								
		•					Belo			
		If no bulk storage facility is owner						Orodina		
∩ Yes ∩ No		Do you plan to export petroleum	•	•	•					
0 103 0 110		Indicate the type of petroleum pro								
	,	Gasoline			d Kerose		Aviation	on Gasoline	\circ	Undyed Biodiesel
		Low Sulfur Diesel	$\tilde{\circ}$	-	(erosene		_	Alcohol	$\tilde{\circ}$	Dyed Biodiesel
		High Sulfur Diesel	Ŏ	Jet Fue			Propa			_ ,
	72.	Indicate the means of transport for	or this ex	ported p	roduct.					
		 Seagoing Vessel/Barge 	\circ	Transpo	ort Truck		O Tank	Wagon		
		O Pipeline	\circ	Railroad	d Tank Ca	ar	Othe	er - Describe _		
	73.	List the destination states for export	ed petrole	eum prod	lucts and	your license	e number in those	e states. (Attach	additiona	I sheets if necessary.
										_
	74.	Estimate the number of taxable g	allons th	_	e exporte	d from this	state during an	average month	١.	
	(Gasoline		Dyed Kerosei	ne			Propane		
	I	ow Sulfur		Jet Fue				Undyed		
		Diesel						Biodiesel		
		High Sulfur Diesel		Aviation Gasolin				Dyed Biodiesel		
		Jndyed		Fuel				biodiesei		
		Kerosene		Alcohol						
◯ Yes ◯ No	75.	Are you a shipper of record on or	ne of the	commer	cial pipel	ines servin	g North Carolina	a?		
		-								
Blender License		List Federal 637 Number:								
		_								
◯ Yes ◯ No	76.	Do you intend to blend taxed mot	tor fuel w	/ith an ur	ntaxed bl	ending con	nponent?			
		If yes, what are you blending with								
◯ Yes ◯ No		Do you plan to purchase gasoline	-			natural gas	s?			
○ Yes ○ No		Do you plan to purchase transmix				-				
○ Yes ○ No		Do you plan to blend gasoline an		cohol?						
		Where will the blending be done?								
		Describe blending operation.								

Fuel Alcohol	Provide	List Federal 637 Number (If applicable):
Yes No	84	Do you produce fuel alcohol in North Carolina? How many gallons of fuel alcohol are produced in North Caroline each month? Do you maintain bulk storage facilities in North Carolina?
		. Where is your bulk storage located?
	87	Fuel Storage Capacity: Above Ground Below Ground
	88	. If no bulk storage facility is owned, explain storage arrangements.
Yes No	89.	Do you plan to import petroleum products into North Carolina?
	90.	Indicate the type of petroleum products imported into North Carolina. Gasoline Fuel Alcohol
	91.	Indicate the means of transport for this imported product. Seagoing Vessel/Barge Transport Truck Tank Wagon Pipeline Railroad Tank Car Other - Describe
	92.	List the states from which you import petroleum products and your license number in those states. (Attach additional sheets if necessary
◯Yes ◯ No		Estimate the number of taxable gallons that will be refined, sold, or used in North Carolina during an average month. Gasoline Fuel Alcohol Do you plan to export petroleum products out of North Carolina?
	95.	Indicate the type of petroleum products exported from North Carolina. Gasoline Fuel Alcohol
	96	Indicate the means of transport for this exported product.
	00.	○ Seagoing Vessel/Barge ○ Transport Truck ○ Tank Wagon
		O Pipeline O Railroad Tank Car Other - Describe
	97.	List the destination states for exported petroleum products and your license number in those states. (Attach additional sheets if necessary)
◯ Yes ◯ No		Are you a shipper of record on one of the commercial pipelines serving North Carolina? What other types of operations will you be engaged in? Exchanges Direct shipments Other - Describe Sales on consignment Sell petroleum products Operate service stations Trade petroleum products
	100.	Provide the following information about suppliers from whom you purchase motor fuel and exchange partners from whom you receive motor fuel. (Attach additional sheets if necessary.)
		Name Shipping/Delivery Point Product ———————————————————————————————————

Biodiesel Provi	der License	List Federal 637	Number (If apple	icable):				
○Yes ○ No	101. Do vou	produce biodiesel in No	orth Carolina?					
0	•	any gallons of biodiesel		North Caroli	ne each month?			
○Yes ○ No		maintain bulk storage fa						
		s your bulk storage loca						
		0 , ,	bove Ground _			Below Ground		
	106. If no bul	k storage facility is own	ed, explain stora	ige arrangen	nents			
○Yes ○ No	107. Do you	plan to import petroleur	n products into N	lorth Carolin	a?			
		the type of petroleum p	•	d into North	Carolina.			
			dyed Biodiesel ed Biodiesel					
	109. Indicate	the means of transport	for this imported	d product.				
	○ Seag	going Vessel/Barge	Transport	ort Truck	\circ	Tank Wagon		
	O Pipel	ine	O Railroa	d Tank Car	0	Other - Describ	e	
	110. List the s	tates from which you imp	ort petroleum pro	ducts and you	ur license number i	n those states. (At	tach additional sh	eets if necessary
		e the number of taxable	_		sed in North Caro	lina during an av	erage month.	
	Undyed Diesel		Undy Biodi					
	Dyed Diesel		Dyed Biodi					
◯ Yes ◯ No	112. Do you	plan to export petroleun	n products out of	i North Carol	ina?			
	113. Indicate	the type of petroleum p	oroducts exported	d from North	Carolina.			
	O Und	dyed Diesel O Ur	ndyed Biodiesel					
	O Dye	ed Diesel Oy	ed Biodiesel					
	114 Indicato	the means of transport	for this expertes	l product				
		the means of transport going Vessel/Barge		ort Truck		Tank Wagon		
	O Pipel			d Tank Car		Other - Describ	e	
		estination states for export			r license number in			ets if necessary.)
		·		•		,		• ,
	-	-			<u> </u>			
○Yes ○ No	-	a shipper of record on			nes serving North	Carolina?		
	117. What ot	her types of operations	will you be enga	ged in?				
	O Excl	hanges	O Direct	shipments	\circ	Other - Describ	oe	
	_	es on consignment		troleum prod				
	Ope	rate service stations	◯ Trade	petroleum pr	oducts			
		the following informatio motor fuel. (Attach add		necessary)	n you purchase m	otor fuel and exc	nange partners f	rom whom you
			<u>olier</u>	iner	N. I	- Dates		
		<u>Name</u>	Supplier	<u>Partner</u>	Shipping/Delivery	/ Point	<u>Produc</u>	<u>I</u>
			0	0 _				
	<u> </u>			<u> </u>				

Alternative Fue	Provider License	List Federal 637 N	lumber (If applicable).						
○ Voc. ○ No.	110. Do you own true	uka that was alternativ	is fuel from the corre	table of the truck to	aranal tha truck?				
Yes No	•	19. Do you own trucks that use alternative fuel from the cargo tank of the truck to propel the truck? 20. How many trucks do you own that use alternative fuel from the cargo tank to propel the truck?							
○ Yes ○ No	-								
0 103 0 110		21. Do you maintain bulk storage facilities for alternative fuel in North Carolina? 22. Where is your bulk storage located?							
	123. Fuel Storage Ca	=	Ground		Below Ground				
	124. If no bulk storag		xplain storage arrang	ements.					
	_	•							
○Yes ○ No	125. Do you plan to i	mport alternative fue	l into North Carolina?						
	126. Indicate the type	of petroleum produ	cts imported into Nort	h Carolina.					
	Compresse	d Natural Gas	O Propane C	Other - Describe	· <u></u>				
	127. Indicate the mea	ans of transport for th	nis imported product.						
	Seagoing V	essel/Barge	Transport Truck	\circ	Tank Wagon				
	Pipeline	(Railroad Tank Ca	ar O	Other - Describe				
	128. List the states from	m which you import a	lternative fuel and you	r license number in th	nose states. (Attach	additional sheets if necessary.			
			ons that will be sold or be included in this		ina during an avera	ge month. (Biodiesel is not			
	Compressed		Dunnana		Other				
	Natural Gas		Propane		Other				
○ Yes ○ No	130. Do you plan to e	evnort alternative fue	l out of North Carolin	a?					
0 100 0 110	, ,	•			sel is not an alterr	native fuel and should			
	not be listed be			(
	Compresse	d Natural Gas	O Propane (Other - Describe					
	132. Indicate the mea	ans of transport for th	nis exported product.						
		essel/Barge	Transport Truck	0	Tank Wagon				
	Pipeline	(Railroad Tank Ca	ar O	Other - Describe				
	133. List the destination	on states for exported	alternative fuel and yo	our license number in	those states. (Attach	n additional sheets if necessar			
○Yes ○ No	134. Are you a shipp	er of record on one c	of the commercial pipe	elines serving North	Carolina?				
	135. What other type	s of operations will y	ou be engaged in?						
	Exchanges		O Direct shipment	s O	Other - Describe				
		onsignment	Sell petroleum p						
	Operate se	rvice stations	Trade petroleum	1 products					
1		_							
Retailer of Alte	rnative Fuel License	List Federal 6	637 Number (If applic	able):					
○ Yes ○ No	136. Do you store bo	•	nighway alternative fu	el in the same storaç	ge tank?				
	137. Fuel Storage Ca	apacity: Above	e Ground		Below Ground				
	138. Estimate the nu	mber of taxable gallo	ons that will be sold in	this state during an	average month.				
	Compressed				2				
	Natural Gas		Propane		Other				
	139 List the states f	rom which alternative	e fuel is imported						

	Compress	ad						
	Natural Ga		Propane		Other			
l2 - List all hulk	storage locations	for alternative fuel	(Attach additional sheets if	necessary)				
Loca		Fuel Type	Tank Capacity	Highway	Nonhighway	Common		
LUCE		i dei Type	Tank Supacity	Use	Use	Storage		
rosene Distr	ibutor License	7						
Yes No	143. Do you m	aintain bulk storage	facilities in North Carolina?					
	144. Where is	your bulk storage lo						
	145. Fuel Stor	age Capacity:	Above Ground		Below Ground			
	146. If no bulk	storage facility is ov	vned, explain storage arranç	jements				
Yes No	147. Do you plan to import kerosene into North Carolina?							
		_	imported into North Carolin	a.				
	Undy	ed Kerosene	Dyed Kerosene					
		_						
			ort for this imported product.		T			
	O Seage	oing Vessel/Barge	O Transport Truck	O	Tank Wagon			
	O Seag	oing Vessel/Barge ne	Transport TruckRailroad Tank C		Other - Describe			
	O Seag	oing Vessel/Barge ne	O Transport Truck		Other - Describe	nal sheets if neces		
	O Seag	oing Vessel/Barge ne	Transport TruckRailroad Tank C		Other - Describe	nal sheets if neces		
	O Seag	oing Vessel/Barge ne	Transport TruckRailroad Tank C		Other - Describe	nal sheets if neces		
	Seage Pipeli	oing Vessel/Barge ne ates from which you	Transport Truck Railroad Tank Co	icense number in th	Other - Describe			
	Seage Pipeli	oing Vessel/Barge ne ates from which you	Transport TruckRailroad Tank C	r used in North Car	Other - Describe			
	Seagu Pipeli 150. List the st	oing Vessel/Barge ne ates from which you the number of taxab	Transport Truck Railroad Tank Country I import kerosene and your	r used in North Car	Other - Describe			
Yes (No	Seage Pipeli 150. List the st	oing Vessel/Barge ne ates from which you the number of taxab	Transport Truck Railroad Tank Country I import kerosene and your Die gallons that will be sold o	r used in North Car	Other - Describe			
Yes (No	Seage Pipeli 150. List the st 151. Estimate Undyed Kerosene 152. Do you pl	oing Vessel/Barge ne ates from which you the number of taxab	Transport Truck Railroad Tank Continued the Railroad Tank	r used in North Car	Other - Describe			
Yes \(\) No	Seage Pipeli 150. List the st 151. Estimate Undyed Kerosene 152. Do you pl 153. Indicate ti	oing Vessel/Barge ne ates from which you the number of taxab	Transport Truck Railroad Tank Continued the Railroad Tank	r used in North Car	Other - Describe			
Yes \(\) No	150. List the standard Kerosene 152. Do you pl 153. Indicate ti 154. Indicate ti 154. Indicate ti 155.	the number of taxab an to export kerosene type of kerosene yed Kerosene me means of transport	Transport Truck Railroad Tank Country Import kerosene and your Dele gallons that will be sold of Dyed Kerosene Dyed Kerosene Dyed Kerosene Ont for this exported product.	r used in North Car	Other - Describenose states. (Attach addition olina during an average mo			
Yes \(\) No	150. List the standard Kerosene 152. Do you pl 153. Indicate ti 154. Indicate ti 154. Indicate ti 155.	the number of taxab an to export kerosene type of kerosene yed Kerosene one means of transpo	Transport Truck Railroad Tank Continued to the properties of the p	r used in North Carero-	Other - Describe			

Bulk-end User of Alternative Fuels License

Kerosene Supp	blier License List Federal 637 Numb	per (If applicable):		
Yes No	156. Do you maintain bulk storage faciliti	es in North Carolina?		
	157. Where is your bulk storage located?			
	0 1 7		Below Ground	
	159. If no bulk storage facility is owned, e	explain storage arrangement	S	
○Yes ○ No	160. Do you plan to import petroleum pro	ducts into North Carolina?		
0 103 0 140	161. Indicate the type of petroleum produ		nlina	
	Undyed Kerosene	Dyed Kerosene	Jet Fuel	Aviation Gasoline
	162. Indicate the means of transport for t	his imported product		
		Transport Truck	O Tank Wagon	
	Pipeline	Railroad Tank Car	Other - Describ	e
	163. List the states from which you import po	etroleum products and your lic	ense number in those states. (Atta	ach additional sheets if necessary.
	164. Estimate the number of taxable gallo	ons that will be sold or used	•	rage month.
	Undyed Kerosene	Jet Fuel	Aviation Gasoline	
	Dyed			
	Kerosene			
Yes No	165. Do you plan to export petroleum pro			
	166. Indicate the type of petroleum produUndyed Kerosene	Dyed Kerosene	Olina. — Jet Fuel	Aviation Gasoline
	167. Indicate the means of transport for t		Jet i dei	Aviation Gasoline
	Seagoing Vessel/Barge	Transport Truck	Tank Wagon	
	Pipeline	Railroad Tank Car	Other - Describ	e
	168. List the destination states for export necessary.)	ed petroleum products and y	our license number in those sta	tes. (Attach additional sheets if
○ Yes ○ No	169. Are you a shipper of record on one of the following information about 170.		-	ange partners from whom you
	receive motor fuel. (Attach addition	al sheets if necessary.)	•	,
	<u>Name</u>	Supplier Exchange Partner ddiyS	oing/Delivery Point	Product
	<u>ivame</u>	Exct Par	mig/Denvery 1 onic	roduct
		_ 0 0		
		_ 0 0		
		0 0		
<u> </u>				
Dyed Diesel Di				
○ Yes ○ No	171. Do you maintain bulk storage facilitie			
	172. Where is your bulk storage located?173. Fuel Storage Capacity: Above		Below Ground	
	174. If no bulk storage facility is owned, ϵ			
Yes No	175. Do you plan to import dyed diesel in			
	176. Indicate the type of dyed diesel impo			
	· ,	ed Biodiesel		
	177. Indicate the means of transport for tSeagoing Vessel/Barge	his imported product. Transport Truck	Tank Wagon	
	O Pipeline	Railroad Tank Car	Other - Describe	•

			- Trainbot in those states. (Altash additional shoots in hosessar
	-		
	179.	Estimate the number of taxable gallons that will be sold or used in	n North Carolina during an average month.
		Dyed Diesel Dyed Biodiesel	
Yes No	180.	Do you plan to export dyed diesel out of North Carolina?	
	181.	Indicate the type of dyed diesel exported from North Carolina.	
		O Dyed Diesel O Dyed Biodiesel	
	182.	Indicate the means of transport for this exported product.	
		Seagoing Vessel/Barge Transport Truck	Tank Wagon
	183.	Pipeline Railroad Tank Car List the destination states for exported dyed diesel and your license	Other - Describe e number in those states. (Attach additional sheets if necessary.
		,,,,,,	
		•	
Transporter Lice	ense	List Federal 637 Number (If applicable):	
◯ Yes ◯ No	184.	Do you transport reportable motor fuel product for hire in North C	arolina?
Yes No	185.	Indicate the means of transport for this reportable motor fuel production	duct.
		Seagoing Vessel/Barge Transport Truck	Tank Wagon
	400	Pipeline Railroad Tank Car	Other - Describe
	186.	List number of North Carolina licensed vehicles operating on Nor	th Carolina's highways.
		Greater than 10,000 lbs. but less than 26,001 lbs Greater than 26,000 lbs	
	187	Complete the following if your vehicles are involved in a lease ag	reement
	107.	Name and Address of Lessor	Telephone Number
		Name and Address of Lessee	
	188.	List the International Fuel Tax Agreement (IFTA) registration state	e and account number for the motor carrier operations.
	400	List the Jutamentianal Devictorian Dlay (IDD) have at the and asset	
	189.	List the International Registration Plan (IRP) base state and acco	unt number for the motor carrier operations.
	190.	List the US DOT Number.	
D 4 - O	4:		
Part 4. Certific	cation		
Inder nenalti	ac nro	vided by law, I hereby affirm that, to the best of my ki	nowledge and helief this application including any
		edules and statements is true and correct.	nowledge and belief, this application including any
, , ,			
0:			l Tau
Signature			Title
Name (type or pr	int)		Date
MAIL TO:			QUESTIONS:
North Carolina	a Dep	artment of Revenue	Contact the Division at:
Excise Tax Di	vision		Telephone Number (919) 707-7500

3301 Terminal Drive, Suite 125 Raleigh, NC 27604

Toll Free Number Fax Number

(877) 308-9092 (919) 250-7898



GAS-1212 Motor Fuel and Alternative Fuel Surety Bond

BOND NO.	
----------	--

		, ("Principal") an
		, ("Surety"
authorized to engage in busines	ss as a surety in the State of North	Carolina, are obligated to the State of North Carolina in the sum of USI
severally obligate heirs, execut	ors, administrators, successors, ar	nd assigns for the payment of this amount.
Principal is engaged or intends in accordance with Articles 36B	to engage in activities where the \$ 3, 36C, or 36D of Chapter 105, or A	Secretary of Revenue of the State of North Carolina is requiring a bon- article 3 of Chapter 119 of the North Carolina General Statutes.
The terms for this bond are as t	follows:	
activities for the sale, u	use, and distribution of motor fuels	omply with all applicable laws, rules, and regulations relating to license and alternative fuels in the State of North Carolina. This includes but i or 36D of Chapter 105, or Article 3 of Chapter 119 of the North Carolin
2. The bond is continuing	and effective for acts or omissions	occurring on or after the day of, 20
mail to the State of No Licensing and Bonding accompanied by a pov of when the liability is	orth Carolina, through its agent, the g Unit, P.O. Box 25000, Raleigh, N wer of attorney. Surety is not releas discovered. Notice, as provided f	pal or Surety provide at least sixty (60) days' written notice by certified Secretary of Revenue at the following address: ATTN: Excise Division C 27640. If the notice is given by an agent of Surety, the notice must be address any liability which accrues before Surety is released, regardles for in this paragraph, is a condition precedent to the release of liability stent with this paragraph is void, and this bond remains in effect.
all available remedies.		the State of North Carolina may make a claim on the bond and pursu
Signed, sealed, and delivered t	his day of	, 20
SURETY NAME		PRINCIPAL NAME
SURETY REPRESENTATIVE S	IGNATURE (SEAL)	PRINCIPAL REPRESENTATIVE SIGNATURE (SEAL)
X		X
SURETY REPRESENTATIVE P	RINTED NAME	PRINCIPAL REPRESENTATIVE PRINTED NAME TITLE
	As Attorney in Fact	
SURETY	PRINCIPAL	NOTARY (IF NO SEAL FOR PRINCIPAL)
Surety declares that the surety's seal is affixed to this form. SURETY SEAL	Principal declares that its seal is affixed to this form. PRINCIPAL SEAL	Principal has not affixed seal; Principal's signature has been notarized below. State of
		My Commission expires

Instructions

- 1. **Bond No.:** Enter the bond number issued by the Surety Company.
- 2. **Principal Name:** Enter the legal name of the individual, partnership, corporation, or limited liability company ("LLC") who is required to furnish the bond. The name must be entered in accordance with the following:
 - Individual Principal: If the Principal is an individual (sole proprietor), and is not incorporated or otherwise registered with the North Carolina Secretary of State or a state's equivalent, the individual must enter his or her legal name. The legal name of an individual principal is the name as listed on a birth certificate or state issued identity card, such as a driver's license.
 - Partnership Principal: If the Principal is a general partnership, the Principal must enter the legal name of the partnership. The legal name of the partnership is the legal names of all partners followed by the partnership name as indicated in the Partnership Agreement. If the Principal is a limited liability partnership, the legal name of the Principal is the name as shown in the Certificate of Limited Partnership or a state's equivalent.
 - **Corporation / LLC Principal:** If the Principal is a corporation or an LLC, the Principal must enter the legal name of the corporation or LLC as indicated in the Articles of Incorporation or Articles of Organization.
 - **NOTE:** If the Principal is registered with the North Carolina Secretary of State or a state equivalent, the Principal name must match the registered name EXACTLY. Please include all apostrophes, commas, periods, spaces, ampersands, and other characters included in the legal name of the entity.
- 3. **Surety Company:** Enter the legal name of the Surety Company underwriting the bond. This name must match the name as registered with the North Carolina Department of Insurance.
- 4. Amount of Bond: Enter the amount of the bond. It must be spelled out in word format and followed by the numeric value.
- 5. **Date Bond Begins:** Enter the date the bond will go into effect. The effective date of the bond may not precede the date a business incorporates with the North Carolina Secretary of State or a state's equivalent. The effective date of the bond may be prior to the date the bond was executed.
- 6. **Signed, Sealed and Delivered Date:** Enter the date the bond is executed (signed by all parties). This date must match the execution date indicated on the attached Surety's Power of Attorney.
- 7. **Surety Name:** Enter the legal name of the Surety Company. The name must match exactly as entered previously on the form. See item #3 above.
- 8. **Signature and Printed Name of Attorney-in-Fact for Surety:** The Surety's Attorney-In-Fact must sign to the left of the words "as Attorney in Fact" and print his or her name on the line below. This individual's name must appear in the attached Power of Attorney.
- 9. **Surety Corporate Seal:** The Surety Company must indicate that it has affixed its seal to this form. Upon the word "SURETY SEAL" the Surety Company must affix its corporate seal. The seal must be affixed by applying a raised seal (embossed), original ink seal, or foil seal. The name on the seal must be readable.
- 10. **Principal Name:** Enter the legal name of the Principal. The name must match exactly as entered previously on the form. See item #2 above.
- 11. Principal Representative Signature, Printed Name, and Title:
 - Individual Principal: If the Principal is an individual (sole proprietor), and is not incorporated or otherwise registered with the North Carolina Secretary of State or a state's equivalent, the individual must sign his or her legal name. Below the signature line, the individual must print his or her name, and the individual must print his or her title. An example title for an individual principal is "Owner."
 - **Partnership Principal:** If the Principal is a general partnership, a general partner must sign his or her legal name. Below the signature line, the general partner must print his or her name, and the general partner must print his or her title. An example title for a partnership principal is "General Partner."
 - Corporation / LLC Principal: If the Principal is a corporation or LLC, the Principal must enter the signature, printed name, and title as follows:
 - **Corporation:** Only a corporate officer who is authorized to legally bind the corporation may sign. This includes a president, vice-president, or treasurer. Below the signature line, the signing corporate officer must print his or her name and title held at the corporation. If a corporation's Bylaws or Board of Directors have appointed specific corporate officials the ability to act on behalf of the corporation, a copy of the bylaw, board resolution, or other corporate document must accompany the bond.

- LLC: Any member of an LLC may sign the bond. Below the signature line, the signing member must print the member's name and print the member's title. An example title for an LLC is "Member."
- Foreign Corporation or LLC: If the Corporation or LLC is organized in a state other than North Carolina, the entity must be authorized to transact business in North Carolina. This does not apply to a Principal who holds a nonresident malt beverage vendor or nonresident wine vendor permit.
- NOTE: If the North Carolina Secretary of State or a state equivalent does not reflect that the person signing the bond has the
 authority to sign the bond, a copy of the bylaws, board resolution, member resolution, or other similar document must accompany
 the bond.
- 12. **Affix Principal's Corporate Seal or Notarize Principal Representative Signature.** The Principal must either: (1) affix the Principal's corporate seal; or (2) sign the bond and have his or her signature acknowledged by a notary in accordance with the following:
 - Affix Principal Seal: If a corporation or LLC affixes its corporate seal, the seal must be affixed upon the word "PRINCIPAL SEAL."
 The name on the seal must be readable. The seal must be affixed by applying a raised seal (embossed), original ink seal, or foil seal.

OR

Notarize Principal Representative Signature: If the Principal does not affix its seal, the Principal must have its Principal's
Representative Signature notarized. The notary must acknowledge the signature and complete the notarial certificate as indicated.
This includes entering: the Principal Representative's name; the date of acknowledgement; the notary public's signature; the
notary public's printed name; and date the notary's commission expires. The notary must affix his or his or her seal upon the
word "NOTARY SEAL." The notary seal must be affixed by applying a raised seal (embossed) or original ink seal. The name on
the seal must be readable.

IMPORTANT: THE BOND MUST BE ACCOMPANIED BY A VERIFIED COPY OF THE AUTHORITY OF THE PERSON EXECUTING THE BOND ON BEHALF OF THE SURETY COMPANY (POWER OF ATTORNEY). THIS DOCUMENT CANNOT BE A PHOTOCOPY AND MUST BE VERIFIED BY AFFIXING A RAISED SEAL (EMBOSSED), ORIGINAL INK SEAL, OR FOIL SEAL.

Additional Notes for Bonds

- Corrections: Any use of whiteout or correction tape will void the bond, and the bond cannot be accepted by the Department. All changes must be initialed by the Principal and the Surety.
- 2. **Legal Entity Managed Principals:** If the Principal is managed or owned by a legal entity, it is recommended that the Surety Company or Principal contact the Department before submitting the bond. For example, if the Principal is owned or managed by a corporation, additional documentation may be required.
- 3. **Originals.** Do not send the Department non-original documents or photocopies of the bond. The Department can only approve bonds with original signatures and seals. The Department may accept a copy of a Power of Attorney if a seal has been affixed. Seals must be affixed using a raised seal (embossed), original ink seal, or foil seal.
- 4. **Surety's Power of Attorney Date:** The "Signed, Sealed and Delivered Date" under item #6 must match the execution date of the Power of Attorney.
- 5. **Principal Representative Name:** A principal representative's name entered in this document must be the legal name. The legal name of a principal representative's name is the name as listed on a birth certificate or state issued identity card, such as a driver's license. This name must match exactly as provided in the North Carolina Secretary of State or its equivalent, bylaw, board resolution, or member resolution.
- 6. **Changes or Addendums:** Neither a Principal nor a Surety may modify the bond without the prior written consent of the Department. Changes, amendments, or addendums to the bond will be rejected and may impair the Principal's ability to become licensed or become registered with the Department.
- Non-Compliance with Instructions. If the bond does not conform to the requirements prescribed by these instructions, the bond will be returned for corrections.

Sample Surety Bond

A sample surety bond is included on page 5. The bond has been annotated by inserting numbers with a red border. These numbers correspond with the numbered instructions provided on pages 2 and 3.

This is provided for illustrative purposes only, and the names of persons used in the bond are fictitious. The seals affixed to the surety bond must be raised (embossed), original ink, or foil. The signatures on the surety bond must be original ink. Electronic reproductions are not acceptable.



B-A-29 | B-A-30 | B-C-790 | GAS-1212 Sample Surety Bond

	l		1 BOND NO.	123456	_
2	PRINCIPAL LICEN	SEE, LLC		, (" Principal") ar	ıd
٦.	SURETY INSURAL	NCE COMPANY		, ("Surety"),
j	authorized to engage in business as a surety in the State of North ONE-HUNDRED THOUSAND 00/100	h Carolina, are obligated		rolina in the sum of US	
Ī	severally obligate heirs, executors, administrators, successors, a	and assigns for the pay	ment of this amount.		
	Lorem ipsum dolor sit amet, consectetur adipiscing elit, sed do e minim veniam, quis nostrud exercitation ullamco laboris nisi ut a			agna aliqua. Ut enim ad	i
	The terms for this bond are as follows:				
	 Lorem ipsum dolor sit amet, consectetur adipiscing elit, enim ad minim veniam, quis nostrud exercitation ullamo in reprehenderit in voluptate velit esse cillum dolore eu t 	co laboris nisi ut ali <mark>quip</mark> (
1	2. The bond is continuing and effective for acts or omissions	s occurring on or after th	e 1st day of JANUAR	Y , 20 22	
	 Lorem ipsum dolor sit amet, consectetur adipiscing elit, enim ad minim veniam, quis nostrud exercitation ullamo in reprehenderit in voluptate velit esse cillum dolore eu sunt in culpa qui officia deserunt mollit anim id est labo eiusmod tempor incididunt ut labore et dolore magna al nisi ut aliquip ex ea commodo consequat. 	co <mark>laboris</mark> nisi ut ali <mark>qui</mark> p <mark>fugiat nulla pariatur. Ex rum.Lorem ipsum dolor</mark>	o ex ea c <mark>ommodo co</mark> nseq xcepteur sin <mark>t occ</mark> aecat cu r sit amet, consectetur ad	uat. Duis aute irure dol upidatat non proident, lipiscing elit, sed do	or
	4. Duis aute irure dolor in reprehenderit in voluptate velit e				
	Duis aute irure dolor in reprehenderit in voluptate velit e cupidatat non proident, sunt in culpa qui officia deserur		•	oteur sint occaecat	
1	cupidatat non proident, sunt in culpa qui officia deserur 5. Lorem ipsum dolor sit amet, consectetur adipiscing elit, enim ad minim veniam, quis nostrud exercitation ullamo	nt mollit anim id est labo , sed do eiusmod tempo co laboris nisi ut aliquip	orum. or incididunt ut labore et o ex ea commodo conseq	dolore magna aliqua.U	:
]	cupidatat non proident, sunt in culpa qui officia deserur 5. Lorem ipsum dolor sit amet, consectetur adipiscing elit,	nt mollit anim id est labo , sed do eiusmod tempo co laboris nisi ut aliquip	orum. or incididunt ut labore et o ex ea commodo conseq	dolore magna aliqua.U	:
]	cupidatat non proident, sunt in culpa qui officia deserur 5. Lorem ipsum dolor sit amet, consectetur adipiscing elit, enim ad minim veniam, quis nostrud exercitation ullamo	nt mollit anim id est labo , sed do eiusmod tempo co laboris nisi ut aliquip	orum. or incididunt ut labore et o ex ea commodo conseq	dolore magna aliqua.U	7-
]	cupidatat non proident, sunt in culpa qui officia deserur 5. Lorem ipsum dolor sit amet, consectetur adipiscing elit, enim ad minim veniam, quis nostrud exercitation ullamo Signed, sealed, and delivered this 1st day of January SURETY NAME	nt mollit anim id est labo , sed do eiusmod tempo co laboris nisi ut aliquip , 2022 . PRINCIPAL NAME PRINCIPAL LICEN	orum. or incididunt ut labore et o ex ea commodo conseq	dolore magna aliqua.Ut uat.	7-
]	cupidatat non proident, sunt in culpa qui officia deserur 5. Lorem ipsum dolor sit amet, consectetur adipiscing elit, enim ad minim veniam, quis nostrud exercitation ullamo Signed, sealed, and delivered this lst day of JANUARY SURETY NAME SURETY INSURANCE COMPANY SURETY REPRESENTATIVE SIGNATURE (SEAL) X Stanley Cupp Jr.	nt mollit anim id est labor, sed do eiusmod tempo co laboris nisi ut aliquip , 2022 PRINCIPAL NAME PRINCIPAL LICEN: PRINCIPAL REPRES X JUSTIN CO	orum. or incididunt ut labore et o ex ea commodo consequences SEE, LLC SENTATIVE SIGNATURE (dolore magna aliqua.Ut uat. (SEAL)	٦_
]	cupidatat non proident, sunt in culpa qui officia deserur 5. Lorem ipsum dolor sit amet, consectetur adipiscing elit, enim ad minim veniam, quis nostrud exercitation ullamo Signed, sealed, and delivered this lst day of january SURETY NAME SURETY INSURANCE COMPANY SURETY REPRESENTATIVE SIGNATURE (SEAL) X Stavley Cupp Jr. SURETY REPRESENTATIVE PRINTED NAME	nt mollit anim id est labor, sed do eiusmod tempo co laboris nisi ut aliquip , 2022 PRINCIPAL NAME PRINCIPAL LICEN: PRINCIPAL REPRES X JUSTIN CO	orum. or incididunt ut labore et o ex ea commodo consequences. SEE, LLC SENTATIVE SIGNATURE (dolore magna aliqua.Ut uat. (SEAL)	1
]	cupidatat non proident, sunt in culpa qui officia deserur 5. Lorem ipsum dolor sit amet, consectetur adipiscing elit, enim ad minim veniam, quis nostrud exercitation ullamo Signed, sealed, and delivered this lst day of January SURETY NAME SURETY INSURANCE COMPANY SURETY REPRESENTATIVE SIGNATURE (SEAL) X Stavley Cupp Jr. SURETY REPRESENTATIVE PRINTED NAME STANLEY CUPP JR. As Attorney in Fact	nt mollit anim id est labor, sed do eiusmod tempo co laboris nisi ut aliquip , 2022 PRINCIPAL NAME PRINCIPAL LICEN: PRINCIPAL REPRES X JUSTIN CO	orum. or incididunt ut labore et o ex ea commodo consequences SEE, LLC SENTATIVE SIGNATURE (dolore magna aliqua.Ut uat. (SEAL)	7-
	cupidatat non proident, sunt in culpa qui officia deserur 5. Lorem ipsum dolor sit amet, consectetur adipiscing elit, enim ad minim veniam, quis nostrud exercitation ullamo Signed, sealed, and delivered this lst day of january SURETY NAME SURETY INSURANCE COMPANY SURETY REPRESENTATIVE SIGNATURE (SEAL) **X Stavley Cupp Jr. SURETY REPRESENTATIVE PRINTED NAME	nt mollit anim id est labor, sed do eiusmod tempo co laboris nisi ut aliquip , 20 22 . PRINCIPAL NAME PRINCIPAL LICEN: PRINCIPAL REPRES X JUSTIN CASE	orum. or incididunt ut labore et o ex ea commodo consequences SEE, LLC SENTATIVE SIGNATURE (dolore magna aliqua.Ui uat. (SEAL) ME TITLE MEMBER	٦
	cupidatat non proident, sunt in culpa qui officia deserur 5. Lorem ipsum dolor sit amet, consectetur adipiscing elit, enim ad minim veniam, quis nostrud exercitation ullamo Signed, sealed, and delivered this lst day of january SURETY NAME SURETY INSURANCE COMPANY SURETY REPRESENTATIVE SIGNATURE (SEAL) X Stavley Cupp Jr. SURETY REPRESENTATIVE PRINTED NAME STANLEY CUPP JR. As Attorney in Fact SURETY PRINCIPAL X Surety declares that the Principal declares that its seal is	nt mollit anim id est labor, sed do eiusmod tempo co laboris nisi ut aliquip , 20 22 . PRINCIPAL NAME PRINCIPAL LICEN: PRINCIPAL REPRES X JUSTUN CO PRINCIPAL REPRES JUSTIN CASE	orum. or incididunt ut labore et o ex ea commodo consequence see, LLC SENTATIVE SIGNATURE (OSE SENTATIVE PRINTED NAI	dolore magna aliqua.Ut uat. (SEAL) ME TITLE MEMBER	7-
]	cupidatat non proident, sunt in culpa qui officia deserur 5. Lorem ipsum dolor sit amet, consectetur adipiscing elit, enim ad minim veniam, quis nostrud exercitation ullamo Signed, sealed, and delivered this lst day of january SURETY NAME SURETY INSURANCE COMPANY SURETY REPRESENTATIVE SIGNATURE (SEAL) X Stanley Cupp Jr. SURETY REPRESENTATIVE PRINTED NAME STANLEY CUPP JR. As Attorney in Fact SURETY PRINCIPAL	nt mollit anim id est labor, sed do eiusmod tempo co laboris nisi ut aliquip , 20 22 . PRINCIPAL NAME PRINCIPAL LICEN: PRINCIPAL REPRES X JUSTUN CO PRINCIPAL REPRES JUSTIN CASE	or incididunt ut labore et o ex ea commodo consequence et o ex ea commodo consequence et consequ	dolore magna aliqua.Ut uat. (SEAL) ME TITLE MEMBER	7-
	cupidatat non proident, sunt in culpa qui officia deserur 5. Lorem ipsum dolor sit amet, consectetur adipiscing elit, enim ad minim veniam, quis nostrud exercitation ullamo Signed, sealed, and delivered this lst day of JANUARY SURETY NAME SURETY INSURANCE COMPANY SURETY REPRESENTATIVE SIGNATURE (SEAL) X Stavley Cupp Jr. SURETY REPRESENTATIVE PRINTED NAME STANLEY CUPP JR. As Attorney in Fact SURETY PRINCIPAL Surety declares that the surety's seal is affixed to this form. 9 12	PRINCIPAL NAME PRINCIPAL LICEN: PRINCIPAL NAME PRINCIPAL LICEN: PRINCIPAL REPRES X JUSTIN CASE NC PRINCIPAL REPRES JUSTIN CASE NC State of North Called Incertify that the following a serious principal serious principal has not affiled to the careful of th	or incididunt ut labore et o ex ea commodo consequence et o ex ea commodo consequence et consequ	dolore magna aliqua.Utiuat. (SEAL) ME TITLE MEMBER CIPAL) tas been notarized below. WAKE before me this day,	
]	cupidatat non proident, sunt in culpa qui officia deserur 5. Lorem ipsum dolor sit amet, consectetur adipiscing elit, enim ad minim veniam, quis nostrud exercitation ullamo Signed, sealed, and delivered this 1st day of JANUARY SURETY NAME SURETY INSURANCE COMPANY SURETY REPRESENTATIVE SIGNATURE (SEAL) X STANLEY CUPP Jr. SURETY REPRESENTATIVE PRINTED NAME STANLEY CUPP JR. As Attorney in Fact SURETY PRINCIPAL Surety declares that the surety's seal is affixed to this form. Principal declares that its seal is affixed to this form.	PRINCIPAL NAME PRINCIPAL LICEN: PRINCIPAL NAME PRINCIPAL LICEN: PRINCIPAL REPRES X JUSTIN CASE NC PRINCIPAL REPRES JUSTIN CASE NC State of North Called Incertify that the following a serious principal serious principal has not affiled to the careful of th	or incididunt ut labore et o ex ea commodo consequence ex	dolore magna aliqua.Utiuat. (SEAL) ME TITLE MEMBER CIPAL) tas been notarized below. WAKE before me this day,	
	cupidatat non proident, sunt in culpa qui officia deserur 5. Lorem ipsum dolor sit amet, consectetur adipiscing elit, enim ad minim veniam, quis nostrud exercitation ullamo Signed, sealed, and delivered this 1st day of JANUARY SURETY NAME SURETY INSURANCE COMPANY SURETY REPRESENTATIVE SIGNATURE (SEAL) X STANLEY CUPP Jr. SURETY REPRESENTATIVE PRINTED NAME STANLEY CUPP JR. As Attorney in Fact SURETY PRINCIPAL Surety declares that the surety's seal is affixed to this form. Principal declares that its seal is affixed to this form.	PRINCIPAL NAME PRINCIPAL LICEN PRINCIPAL REPRES X JUSTUN CO PRINCIPAL REPRES JUSTIN CASE Principal has not affi State of North Ca I certify that the follows acknowledging to me	or incididunt ut labore et o ex ea commodo consequence ex	dolore magna aliqua.Utiuat. (SEAL) ME TITLE MEMBER CIPAL) wake before me this day, ining document:	
]	cupidatat non proident, sunt in culpa qui officia deserur 5. Lorem ipsum dolor sit amet, consectetur adipiscing elit, enim ad minim veniam, quis nostrud exercitation ullamo Signed, sealed, and delivered this 1st day of JANUARY SURETY NAME SURETY INSURANCE COMPANY SURETY REPRESENTATIVE SIGNATURE (SEAL) X STANLEY CUPP Jr. SURETY REPRESENTATIVE PRINTED NAME STANLEY CUPP JR. As Attorney in Fact SURETY PRINCIPAL Surety declares that the surety's seal is affixed to this form. Principal declares that its seal is affixed to this form. PRINCIPAL PRINCIPAL PRINCIPAL SEAL PRINCIPAL SEAL	PRINCIPAL NAME PRINCIPAL LICEN: PRINCIPAL NAME PRINCIPAL LICEN: PRINCIPAL REPRES X JUSTIN CASE PRINCIPAL REPRES JUSTIN CASE NC I certify that the follow acknowledging to me	or incididunt ut labore et o ex ea commodo consequence ex	dolore magna aliqua.Utiuat. (SEAL) ME TITLE MEMBER CIPAL) wake before me this day, ining document:	[•
]	cupidatat non proident, sunt in culpa qui officia deserur 5. Lorem ipsum dolor sit amet, consectetur adipiscing elit, enim ad minim veniam, quis nostrud exercitation ullamo Signed, sealed, and delivered this 1st day of JANUARY SURETY NAME SURETY INSURANCE COMPANY SURETY REPRESENTATIVE SIGNATURE (SEAL) X Stavley Cupp Jr. SURETY REPRESENTATIVE PRINTED NAME STANLEY CUPP JR. As Attorney in Fact SURETY PRINCIPAL Surety declares that the surety's seal is affixed to this form. Principal declares that its seal is affixed to this form. PRINCIPAL PRINCIPAL PRINCIPAL SEAL PRINCIPAL SEAL PRINCIPAL SEAL PRINCIPAL SEAL	PRINCIPAL NAME PRINCIPAL LICEN: PRINCIPAL REPRES X JUSTIN CASE PRINCIPAL REPRES JUSTIN CASE Principal has not affi State of North Ca I certify that the follow acknowledging to me Lorvy R. D Signature of Notary Po	or incididunt ut labore et o ex ea commodo consequence ex	dolore magna aliqua.Utiuat. (SEAL) ME TITLE MEMBER CIPAL) wake before me this day, ining document:	[•
]	cupidatat non proident, sunt in culpa qui officia deserur 5. Lorem ipsum dolor sit amet, consectetur adipiscing elit, enim ad minim veniam, quis nostrud exercitation ullamo Signed, sealed, and delivered this 1st day of JANUARY SURETY NAME SURETY INSURANCE COMPANY SURETY REPRESENTATIVE SIGNATURE (SEAL) X Stavley Cupp Jr. SURETY REPRESENTATIVE PRINTED NAME STANLEY CUPP JR. As Attorney in Fact SURETY PRINCIPAL X Surety declares that the surety's seal is affixed to this form. Principal declares that its seal is affixed to this form. PRINCIPAL PRINCIPAL PRINCIPAL PRINCIPAL PRINCIPAL SEAL 2009	PRINCIPAL NAME PRINCIPAL REPRES X JUSTIN CASE Principal has not affi State of North Ca I certify that the follow acknowledging to me Lorvy R. D	or incididunt ut labore et o ex ea commodo consequence ex	dolore magna aliqua.Utiuat. (SEAL) ME TITLE MEMBER CIPAL) wake before me this day, ining document:	٦_
]	cupidatat non proident, sunt in culpa qui officia deserur 5. Lorem ipsum dolor sit amet, consectetur adipiscing elit, enim ad minim veniam, quis nostrud exercitation ullamo Signed, sealed, and delivered this 1st day of JANUARY SURETY NAME SURETY INSURANCE COMPANY SURETY REPRESENTATIVE SIGNATURE (SEAL) X Stavley Cupp Jr. SURETY REPRESENTATIVE PRINTED NAME STANLEY CUPP JR. As Attorney in Fact SURETY PRINCIPAL Surety declares that the surety's seal is affixed to this form. Principal declares that its seal is affixed to this form. PRINCIPAL PRINCIPAL PRINCIPAL SEAL PRINCIPAL SEAL PRINCIPAL SEAL PRINCIPAL SEAL	PRINCIPAL NAME PRINCIPAL LICEN: PRINCIPAL REPRES X JUSTIN CASE PRINCIPAL REPRES JUSTIN CASE NO I certify that the follow acknowledging to me JUSTIN CAST LOUVY R. D Signature of Notary Po- Lorry R. Drincipal Representations of the control o	or incididunt ut labore et o ex ea commodo consequence ex	dolore magna aliqua.Utiuat. (SEAL) ME TITLE MEMBER CIPAL) las been notarized below. WAKE before me this day, ining document: sipal Representative)	

3301 Terminal Drive, Suite 125, Raleigh, NC 27604

(IRREVOCABLE LETTER OF CREDIT TEMPLATE) (Reproduce on Letterhead of Issuing Bank)

6-21 [Date]

North Carolina Department of Revenue ATTN: Excise Tax Division 3301 Terminal Drive, Suite 125 Raleigh, North Carolina 27604

Re:	Irrevocable	Letter of Credit No.:				
	Beneficiary	: North Carolina Department of Revenue				
	Principal:	[Name of Principal] [Address of Principal] [Other information Concerning the Principal, Optional]				
	Tax Type:					
	Coverage P	Period: Effective Date				
		Expiration Date*(No sooner than 365 days after the "Effective Date")				
	*Also, Subject to Any Extended Expiration Date(s)					
	(Calculate b	lease Date*:y using three years after the expiration date.)				
	·	ubject to Any Extended Liability Release Date(s)				
	Credit Amo	unt:				
("Prin	cipal"), we	nd for the account of hereby issue this Irrevocable Letter of Credit No ("Letter of Credit") in favor of the North Carolina enue ("Beneficiary").				
Dollar pursu	rs (\$	uis Letter of Credit is U.S U.S) (the "Credit Amount"). You shall be entitled to draw etter of Credit, amounts not exceeding, in the aggregate, the				

This Letter of Credit is issued with the purpose of protecting the Beneficiary against any noncompliance of the Principal with the requirements of Subchapters I or V of Chapter 105 of the North Carolina General Statutes, including but not limited to Article 2A, Article 2C, Article 5I, Articles 36B, 36C, or 36D, and the authority of Chapter 119 of the North Carolina General Statutes, including but not limited to Article 3, as these statutes may be from time to time amended, modified, recodified, or otherwise rewritten.

This Letter of Credit covers acts, omissions, and liabilities of the Principal under the above-listed North Carolina General Statutes for a term which begins with ______ ("Effective Date") and ends with ______ ("Expiration Date"), the total term of which is the period covered by this Letter of Credit (the "Coverage Period"). We are obligated for all acts, omissions, and liabilities owed by the Principal to the Beneficiary during the Coverage Period.

It is a condition of this Letter of Credit that the Expiration Date shall be automatically extended, without amendments, for successive one-year periods from the Expiration Date, unless at least 90 days prior to the then applicable Expiration Date, the Beneficiary receives notification in writing from us, which notification shall be sent by registered mail or overnight courier, that we elect not to renew this Letter of Credit for an additional period. An automatic extension of this Letter of Credit shall result in a new Expiration Date which shall be known as the Extended Expiration Date. The most recent Expiration Date or Extended Expiration Date shall be the date through which this Letter of Credit is authorized. A decision not to renew this Letter of Credit shall not relieve, release, or discharge us from any obligations under this Letter of Credit.

It is a condition of this Letter of Credit that we shall not be released from any obligations or liabilities under this Letter of Credit until three years after the Expiration Date or Extended Expiration Date, whichever date is later, or within 90 days after a proposed assessment based on a final audit of the Principal's records has been issued by the Beneficiary, whichever occurs first ("Liability Release Date"). If the Liability Release Date is not a date on which we are open for business, then the Liability Release Date shall be the next day on which we are open for business.

We hereby agree with the Beneficiary that we shall honor, at sight, a presentation made by you to us of the following documents:

- 1. Original Letter of Credit (including any amendments); and
- 2. A demand using the form attached hereto and denoted as "Exhibit A" or a document which provides the same information as "Exhibit A."

Such documents must be delivered to us in person, by overnight courier, or by facsimile no later than 5:00 p.m. on the Liability Release Date of this Letter of Credit. Presentation is to be made to:

[Name of Issuing Bank]
[Address of Bank]
[Any Other Information, Optional]

In lieu of presenting the physical documents required for presentation under the terms of this Letter of Credit, the Beneficiary may choose to make a presentation under this Letter of Credit entirely by facsimile transmission. Such transmission shall be made on a business day by simultaneously providing telephone advice to the Bank's office and transmitting the documents by facsimile to the following numbers:

Telephone Number:	
Fax Number:	
[Any Additional Instructions, Optional]	

On the day of such presentment by facsimile transmission, the Beneficiary shall immediately send to us the originals of the faxed documents by overnight mail or courier service to the bank's office address as above specified. However, we will determine to honor or dishonor any such facsimile presentation purely on the basis of our examination of such facsimile presentation, and will not examine the originals.

If a draft is presented at or prior to 11:00 a.m. on a day on which we are open for business, payment of the amount drawn shall be made by 4:00 p.m. on the same day. If a draft is presented after 11:00 a.m. on a day on which we are open for business, payment of the amount drawn shall be made by 11:00 a.m. on the next day on which we are open for business. All payments by us will be in immediately available funds. Payment may be made by wire transfer of immediately available funds to the account specified by you, or by deposit in a designated account you maintain with us.

We shall accept demand by you with the terms of this Letter of Credit on its face, and we shall have no duty, responsibility, or liability to the Principal with respect to the underlying validity of said demand.

It is a condition of this Letter of Credit that this document is an irrevocable letter of credit that cannot be modified or revoked without the written consent of the Beneficiary.

It is a condition of this Letter of Credit that any banking or other charges from this Letter of Credit are to be borne by the Principal and not by the Beneficiary.

This Letter of Credit is subject to the Uniform Customs and Practice for Documentary Credits (2007 Revision), International Chamber of Commerce, Publication No. 600 (The "UCP").

This Letter of Credit shall be governed by the laws of the State of North Carolina.

Sincerely,
[Name of Issuing Bank]
Ву:
Name:
Title:

INSTRUCTIONS: PLEASE REPRODUCE AND COMPLETE THE ABOVE TEMPLATE ON YOUR LETTERHEAD, INCLUDING EXHIBIT A WHICH FOLLOWS. Please fax a DRAFT of the completed Irrevocable Letter of Credit for the Department's review and approval prior to issuing an original document. The draft should be faxed to the Excise Tax Division at 919-250-7898. If you have any questions, please contact the Excise Tax Division at 877-308-9092 or 919-707-7500.

Exhibit A

(North Carolina Department of Revenue Letterhead)

[Date]	
[Name and Address of Issuing Bank]	
Re: [Name of Issuing Bank] Irrevocable Credit No	e Letter of
The undersigned Beneficiary demands payment of U.S. \$	
under Letter of Credit No, dated,	·
[Instructions for payment – check, bank account number, etc.]	
North Carolina Department of Revenue	
By:	
Name:	
Title:	