

Motor Fuel Tax

96-0611 R02/15 azdot.gov

Company Name		Trade Name (DBA)			
Business Street Address	Cit	ΥΥ Υ	State	Zip	
Business Phone ()	ADOT Account Number	Refund Account Number	ederal E	IN	

The original license application must be signed by the licensee or authorized officer of the business. No power of attorney or agent signature will be accepted on the original license application.

Authorized Representative Company Name	Authorized Representative E-mail Address	
Authorized Representative Name (first, middle, last, suffix)	Phone ()	Fax ()
Business Street Address	City	State Zip

This power of attorney authorizes the above named agent to:

□ Sign and file all fuel tax reports and documents for this account, except for electronic fuel tax reports:

□ Supplier □ Restricted Distributor □ Vendor □ Refund Claimant

D Provide, receive and discuss information on all matters for this account:

□ Supplier □ Restricted Distributor □ Vendor □ Refund Claimant

□ Be the main point of contact for this account:

□ Supplier □ Restricted Distributor □ Vendor □ Refund Claimant

This power of attorney will remain on file with ADOT and in effect until the company revokes the authority in writing.

I certify that the authorized representative is allowed to perform the functions checked above. I relieve the Arizona Department of Transportation and its representatives of any liability related to the release of such information to the above named authorized representative. I understand that this authorization does not absolve me, as owner or authorized officer, of the responsibility to ensure that all tax reports, taxes, license applications and payments are filed and paid on time. Also, I understand that this authorization replaces any prior authorization filed with ADOT.

Owner or Authorized Officer Name	Title
Owner or Authorized Officer Signature	

Acknowledged before me this date.		Notary or ADOT Agent Signature		
Date	County		State	Commission Expires