Department of Revenue Services State of Connecticut PO Box 2937 Hartford CT 06104-2937

CT-IFTA-2

Application For International Fuel Tax Agreement (IFTA)

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If registered, enter

Connecticut Tax Registration Number (Rev. 12/14) **License Connecticut Carrier** ☐ Check if your mailing address Complete this form in blue or black ink only. Please read all instructions on back before completing. has changed and indicate new address. 1. Reason for applying Registration of additional vehicles Other: Explain ■ New account 2. Name of owner, partnership, corporation, or LLC Federal Employer ID Number (FEIN) 3. Trade name or registered name, if different from Line 2 Social Security Number (SSN) 4. Physical location of this business: PO Box is not acceptable ZIP plus 4 Telephone number 5. Mailing address of this business, if different from Line 4 ZIP plus 4 United States DOT Number SSN 6. Name and home address of owner, partner, corporate officer, or LLC member ZIP plus 4 7. Names and home addresses of other partners, corporate officers, or LLC members SSN ZIP plus 4 8. Type of ownership: If **Other**, attach explanation. Other ■ Sole proprietor ☐ General partnership Limited partnership Corporation S corporation Limited liability company (LLC) Single member LLC 8a. Organized under laws of what state? ☐ Check if taxed as a corporation Check if taxed as a corporation 9. Are you currently or have you been registered with another jurisdiction under IFTA? ■ No If Yes, enter the name of the jurisdiction. 10. Describe in detail the type of business you operate. Yes 11. Do you store fuel in bulk? ☐ No If **Yes**, where is the fuel stored? 11a. Types of fuel used Special Diesel Gasoline Ethanol Propane Biodiesel A-55 E-85 M-85 LNG Methanol Gasohol **CNG** 12. Contact Information Contact Name **Email Address** 13. Enter **X** for the jurisdictions in which you operate or anticipate operating: AB -Alberta AL -Alabama IA - Iowa NE - Nebraska - Rhode Island BC - British Columbia AZ -Arizona KS - Kansas NV - Nevada SC -South Carolina NB - New Brunswick SD MB - Manitoba AR -Arkansas NH - New Hampshire -South Dakota KY - Kentucky CA - California NJ - New Jersey TN -Tennessee ON - Ontario LA -Louisiana CO - Colorado ME - Maine NM - New Mexico TX -Texas QC -Quebec CT -Connecticut MD - Maryland NY - New York UT -Utah SK - Saskatchewan NC - North Carolina -Virginia NL - Newfoundland DE -Delaware MA - Massachusetts VA ND - North Dakota NW - NW Territory FL -Florida MI - Michigan VT Vermont GA - Georgia MN - Minnesota OH - Ohio WA - Washington NS - Nova Scotia ID -Idaho OK - Oklahoma WV -West Virginia PE - Prince Edward Isle MS - Mississippi II - Illinois MO - Missouri OR - Oregon WI -Wisconsin YU - Yukon Territory - Indiana - District of Columbia PA - Pennsylvania WY -Wyoming DC IN MT - Montana 14. Fees: All applicants must Enter total number of qualified vehicles to be Number of qualified vehicles Fee Amount due complete this section. registered. X \$10 =

Declaration: I declare under the penalty of false statement that I have examined this application, CT-IFTA-2, and to the best of my knowledge and belief it is true, complete, and correct. The applicant agrees to comply with reporting, payment, recordkeeping, and license display requirements as specified in the International Fuel Tax Agreement (IFTA). The applicant further agrees that base jurisdiction may withhold any refunds due if the applicant is delinquent in paying fuel taxes due any member jurisdiction. Failure to comply with these provisions shall be grounds for revocation of the IFTA license. I understand that IFTA decals may not be transferred by me to another person, or from one

vehicle to another.

Make check payable to Commissioner of Revenue Services

CT-IFTA-2 - Instructions

Do not use this CT-IFTA-2, Application For International Fuel Tax Agreement (IFTA) License Connecticut Carrier, to request Connecticut motor carrier road tax decals, submit Form REG-3-MC, Application for Motor Carrier Road Tax.

Qualified motor vehicles are those used, designed, or maintained for transportation of persons or property **and**:

- Have two axles and a gross vehicle weight or registered gross vehicle weight exceeding 26,000 pounds or 11,797 kilograms;
- Have three or more axles regardless of weight; or
- Are used in combination and the combined gross vehicle weight or registered gross vehicle weight exceeds 26,000 pounds or 11,797 kilograms.

The term qualified motor vehicle does not include recreational vehicles.

You may not transfer International Fuel Tax Agreement (IFTA) decals to another person or from one vehicle to another.

Line Instructions

Line 1: Check the appropriate box for a new account, registration of additional vehicles, or *other* reasons such as, renewal, replacement decals, or change of ownership. If there has been a change of identity, form of ownership, or organization, you **must** apply for a new CT-IFTA number. If you are registered with the Connecticut Department of Revenue Services (DRS), enter your Connecticut Tax Registration Number in the upper right corner of this form.

Line 2: Print the name of the owner, partnership, corporation, or limited liability company (LLC) and enter its Federal Employer Identification Number (FEIN). Enter proprietor's name if a sole proprietorship. If it is a sole proprietorship with no employees and is not required to have a FEIN, enter the proprietor's Social Security Number (SSN).

Line 3: Print the **trade or registered name** if different from Line 2. A **trade or registered name** is the name under which business is done, but not necessarily the owner's name. Example: If John Travel is the proprietorship entered on Line 2, but John T. Trucker Co. is the name chosen by John Travel for his business, then John T. Trucker Co. is the name he would enter on Line 3.

Line 4: Print the physical location of the business. Do not use PO Boxes or rural route numbers. Indicate where the business is actually located.

Line 5: Print the mailing address of the business if different from Line 4. Complete only if mailing and business addresses are different.

Line 6: Print the name and home address of the proprietor, partner, corporate officer, or LLC member. Identify the proprietor if a sole proprietorship, partners if a partnership, or officers if a corporation.

Line 7: Print the names and home addresses of other partners, corporate officers, or LLC members.

Line 8: Check the appropriate box to indicate the type of business. If *Other*, attach an explanation.

Line 8a: Enter the name of the state under the laws of which the business is organized.

Line 9: Check the appropriate box to indicate whether you are currently or were previously registered with another jurisdiction for IFTA. If you check **Yes**, enter the name of the jurisdiction you are currently or were previously registered in for IFTA.

Line 10: Provide details of your business operations or activities.

Line 11: Check the appropriate box to indicate if you store fuel in bulk. If you check **Yes**, list the city and state where the fuel is stored.

Line 11a: Enter an X next to the type(s) of fuel used in your qualified motor vehicles.

Line 12: Provide a contact name and email address. This **must** be completed to permit online access for the electronic filing of returns, renewal of the license, and ordering of additional decals.

Line 13: Enter an X next to each jurisdiction in which you are likely to operate.

Line 14: Indicate the number of IFTA qualified motor vehicles requiring decals. Two numbered decals will be issued for each qualified motor vehicle. One decal must be placed on the lower rear exterior of the passenger side cab door and the matching decal must be placed on the lower rear exterior of the driver side cab door of each vehicle.

This application must be signed by an owner, partner, corporate officer, or LLC member.

Failure to complete all items on this application may result in a delay in processing your application.

Make your check payable to **Commissioner of Revenue Services**. DRS may submit your check to your bank electronically.

Return the completed application with full payment to:

Department of Revenue Services Operations Bureau/Walk-in PO Box 2937 Hartford CT 06104-2937

If you need assistance or additional information about applications or registering your vehicle(s), call DRS at **860-297-4870**, Monday through Friday, 8:30 a.m. to 4:30 p.m.

For More Information

Call DRS during business hours, Monday through Friday:

- 1-800-382-9463 (Connecticut calls outside the Greater Hartford calling area only); or
- 860-297-5962 (from anywhere).

TTY, TDD, and Text Telephone users only may transmit inquiries anytime by calling 860-297-4911.

Forms and Publications: Visit the DRS website at **www.ct.gov/DRS** to download and print Connecticut tax forms and publications.