



FET LICENSE APPLICATION

Calendar Year 2025

New Application:

Renewal:

If Renewal, please list current license number: _____

SEE ATTACHED INSTRUCTIONS
INCOMPLETE APPLICATIONS WILL BE DENIED.

ONTC USE ONLY

Type of License: _____

License Number: _____

Date Issued: _____

Approved By: _____

Denied By: _____

CHECK ONE (1) ONLY:

Separate applications must be completed for each type of license requested

DISTRIBUTOR

CARRIER

RETAILER

REFINER

1. Business Name : _____

2. Tax Identification Number (TIN) : _____

3. Business Mailing Address : _____

(City, State, Zip Code) _____

4. Business Telephone Number: _____

5. Physical Location of Business within the Navajo Nation. Please provide a Google map of location. (if not applicable, indicate N/A) :

(Street Address) _____

(City, State) _____

6. Land Status of Business Site (if not applicable, indicate N/A) :

Tribal Trust

Business Site Lease Number : _____

Allotment

Expiration Date : _____

Fee (Private)

Other (Explain) _____

7. Type of Business (Check One) :

Sole Proprietorship

Partnership

Governmental Entity or Enterprise

Corporation

Other (Explain) _____

8. Contact Person: _____

Telephone Number, if different from #4 (Above).

Title : _____

E-mail Address: _____

9.a. List names, titles and addresses of all *corporate officers* of your business (attach additional pages if necessary) :

(If not applicable, indicate N/A)

	<u>Name and Title</u>	<u>Mailing Address</u>
1	_____	_____
	_____	_____
2	_____	_____
	_____	_____

9.b. List names, titles and addresses of all *directors* of your business (attach additional pages if necessary) :

(If not applicable, indicate N/A)

	<u>Name and Title</u>	<u>Mailing Address</u>
1	_____	_____
	_____	_____
2	_____	_____
	_____	_____

9.c. List names, titles and addresses of all *general partners* of your business (attach additional pages if necessary) :

(If not applicable, indicate N/A)

	<u>Name and Title</u>	<u>Mailing Address</u>
1	_____	_____
	_____	_____
2	_____	_____
	_____	_____

9.d. List names, titles and addresses of all *shareholders with controlling interests in your business** (attach additional pages if necessary): (If not applicable, indicate N/A)

	<u>Name and Title</u>	<u>Mailing Address</u>
1	_____	_____
	_____	_____
2	_____	_____
	_____	_____

*if ≤ 15 shareholders, list all; if more than 15 shareholders, list those with $\geq 5\%$ of ownership.

9.e. List names, titles and addresses of all *principal officers* of your business (attach additional pages if necessary) :

(If not applicable, indicate N/A)

	<u>Name and Title</u>	<u>Mailing Address</u>
1	_____	_____
	_____	_____
2	_____	_____
	_____	_____
	_____	_____
	_____	_____

10. Has the applicant, or any officer or director thereof, been convicted of a felony within the past 10 years?

Yes No

If yes, explain : _____

11. Has the applicant, or any officer or director thereof, been found to have violated any applicable Navajo Nation or Federal Law within the past 10 years?

Yes No

If yes, explain : _____

12. Has the applicant, or any officer or director thereof, had any temporary or permanent suspension or revocation of any license or other authorization pertaining to the distribution, carrying, transportation, refining, or retailing of fuel within the past 10 years?

Yes No

If yes, explain : _____

13. Complete and attach the Acknowledgment Sheet.

I declare that the information contained in this document and any attachments thereto is true and correct to the best of my knowledge and belief pursuant to all Navajo Nation Laws and Regulations.

Taxpayer or Duly Authorized Agent Signature

Title

Print or Type Name

Date

ACKNOWLEDGEMENT SHEET

Please initial EACH LINE. Do not leave blank and do not indicate N/A.

Pursuant to FET Regulations 9.1023, FAILURE to submit this Acknowledgement Sheet and any supporting documents may result in a \$500 per day penalty.

Applicant Initials		ONTC USAGE
13a. _____	The FET application is signed.	
13b. _____	Completed "Bond for Fuel Distributor's License" is enclosed. (Distributor only)	
13c. _____	Completed Form 100(s) for calendar year 2025 for EACH applicable tax is enclosed. (Retailer, Refiner, Carrier, Distributor)	
13d. _____	Reviewed Navajo Nation Fuel Excise Tax Statutes & Regulations. (Retailer, Refiner, Carrier, Distributor)	
13e. _____	CURRENT Insurance coverage for all trucks, trailers retail and refinery locations operating on the Navajo Nation is enclosed. (Retailer, Refiner, Carrier, Distributor)	
13f. _____	2024 IFTA License is enclosed. (Carrier only)	
13g. _____	Vehicle Identification Numbers(VIN) list for ALL trucks and trailers operating on the Navajo Nation is enclosed. (Carrier)	
13h. _____	UNEXPIRED & COMPLETED Annual Inspection for ALL trucks and trailers operating on the Navajo Nation are enclosed. (Carrier)	
13i. _____	Current List of ALL Authorized Drivers operating on the Navajo Nation is enclosed. (Carrier)	
13j. _____	UNEXPIRED Safety & Hazmat Training Certification for each driver/personnel operating on the Navajo Nation are enclosed. (Carrier & Refiner)	
13k. _____	Decal request letter is enclosed. (Retailer only)	
13l. _____	Refiner questionnaire is enclosed. (Refiner only)	
13m. _____	Application Fee is enclosed. (\$100-Retailer & Refiner, \$150- Carrier, \$200- Distributor) on the NN are enclosed (Carriers & Refiners Only)	