



FET LICENSE APPLICATION

Calendar Year 2026

SEE ATTACHED INSTRUCTIONS
INCOMPLETE APPLICATIONS WILL BE DENIED.

CHECK ONE (1) ONLY

Separate applications must be completed for each type of license requested

DISTRIBUTOR
CARRIER
RETAILER
REFINER

New Application

Renewal, License Number: _____

1. Contact Person Information		
1a. Name Title	1b. E-mail Address	1c. Phone Number, if different from #4 (Below)
Business Information		
2. Business Name		
3. Tax Identification Number (TIN)	5. Mailing Address (City) (State) (Zip Code)	
4. Business Phone Number	6. Physical Location of Business within the Navajo Nation (Street Address) (City) (State)	
7. Type of Business (Check One) Corporation Government Entity or Enterprise Partnership Sole Proprietorship Other: _____	8a. Land Status of Business Site (if not applicable, indicate N/A 8a-8c) Tribal Trust Allotment Fee (Private) Other (Explain): _____	8b. Business Site Lease Number
		8c. Expiration Date
9. Has the applicant, or any officer or director thereof, been convicted of a felony within the past 10 years? If yes, explain: YES NO		
10. 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 year? If yes, explain: YES NO		
11. 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? If yes, explain: YES NO		

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.

Title

Print or Type Name

Taxpayer or Duly Authorized Agent Signature

Date

12. Listing of Names, Titles, and Address (attach additional pages if necessary):

12a. All corporate officers of your business (If not applicable, indicate N/A)	
<p>1. Name: Title: Mailing Address:</p>	<p>2. Name: Title: Mailing Address:</p>
<p>3. Name: Title: Mailing Address:</p>	<p>4. Name: Title: Mailing Address:</p>
12b. All directors of your business (If not applicable, indicate N/A)	
<p>1. Name: Title: Mailing Address:</p>	<p>2. Name: Title: Mailing Address:</p>
<p>3. Name: Title: Mailing Address:</p>	<p>4. Name: Title: Mailing Address:</p>
12c. All general partners of your business (If not applicable, indicate N/A)	
<p>1. Name: Title: Mailing Address:</p>	<p>2. Name: Title: Mailing Address:</p>
<p>3. Name: Title: Mailing Address:</p>	<p>4. Name: Title: Mailing Address:</p>
12d. All shareholders* of your business (If not applicable, indicate N/A)	
<p>1. Name: Title: Mailing Address:</p>	<p>2. Name: Title: Mailing Address:</p>
<p>3. Name: Title: Mailing Address:</p>	<p>4. Name: Title: Mailing Address:</p>
12e. All principal officers of your business (If not applicable, indicate N/A)	
<p>1. Name: Title: Mailing Address:</p>	<p>2. Name: Title: Mailing Address:</p>
<p>3. Name: Title: Mailing Address:</p>	<p>4. Name: Title: Mailing Address:</p>

ONTC USE ONLY:

Type of License:

- Carrier Retailer
 Distributor Refiner

License Number: _____

Approved By: _____

Date Issued: _____

Denied By: _____

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 the 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 Form 100(s) for calendar year 2026 for EACH applicable tax is enclosed. (Retailer, Refiner, Carrier, Distributor)			
13c. _____	Reviewed Navajo Nation Fuel Excise Tax Statutes & Regulations. (Retailer, Refiner, Carrier, Distributor)			
13d. _____	CURRENT Insurance coverage for all trucks, trailers retail and refinery locations operating on the Navajo Nation is enclosed. (Retailer, Refiner, Carrier, Distributor)			
13e. _____	Application Fee is enclosed. (\$100-Retailer & Refiner, \$150-Carrier, \$200-Distributor)			
13f. _____	2026 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 ONLY)			
13h. _____	UNEXPIRED & COMPLETED Annual Inspection for ALL trucks and trailers operating on the Navajo Nation are enclosed. (Carrier ONLY)			
13i. _____	CURRENT List of ALL Authorized Drivers operating on the Navajo Nation is enclosed. (Carrier ONLY)			
13j. _____	UNEXPIRED Safety & Hazmat Training Certification for each driver/personnel operating on the Navajo Nation are enclosed. (Carrier ONLY)			
13k. _____	Copies of ALL Authorized Drivers' Commercial Drivers Licenses. (Carrier ONLY)			
13l. _____	Completed "Bond for Fuel Distributor's License" is enclosed. (Distributor ONLY)			
13m. _____	Decal request letter is enclosed. (Retailer ONLY)			
13n. _____	Google Map of Retailer Location. (Retailer ONLY)			
13o. _____	Refiner questionnaire is enclosed. (Refiner ONLY)			