

# Michigan Department of Agriculture and Rural Development

## New Motor Fuel Retail Outlet License Application

Michigan Department of Agriculture & Rural Development  
P.O. BOX 30776  
LANSING MI 48909-8276  
Phone: 1.800.292.3939 Email: mdard-clu@michigan.gov  
In Accordance with 1984 Public Act 44

Office Use Only

### STEP 1: ORGANIZATION INFORMATION

\*Ownership Type (check one):  Corporation  Sole Proprietor  
 Limited Liability Co.  Joint Tenant  Partnership  Individual

\*Ownership Name:

\*\*Federal Identification #:

Email Address:

\*Mailing Address:

\*City:

\*State:

\*Zip:

### STEP 2: BUSINESS INFORMATION

\*Business Name:

\*Address:

\*City:

\*State:

\*Zip:

\*County:

### STEP 3: LICENSING UNIT INFORMATION

Number of Grade of Gasoline/Diesel (1-10):

Number of Hoses Used to Dispense Gasoline/Diesel:

License Motor Fuel Retail Responsibilities (Check One):

Both Fuel and Pumps  Only the Fuel  Only the Fuel Pumps  Neither the Fuel nor the Pumps

### STEP 4: CONTACT INFORMATION

\* Contact Name:

\*Phone:

Email:

\*Address:

\*City:

\*State:

\*Zip:

\*Date of Birth:

Michigan Resident Agent required if organization and prior addresses are outside Michigan.

Contact Name:

Phone:

Email:

Address:

City:

State:

Zip:

Date of Birth:

**By submitting this application and payment I hereby verify and affirm that all information contained in this application is true and accurate**

\* Please note that all fields marked with an asterisk (\*) are required and must be completed in order to process your license application

\*\* Please note Federal Identification Number is not required for individual ownership types