

# International Fuel Tax Agreement (IFTA) Address Change Request

Use this form to change the physical and/or mailing address on your online IFTA account. If additional space is needed for Part 2 and Part 3, use the back of this page. This form must be signed and dated by a corporate officer, contact person, owner, or agent or it will not be processed. To access your online account or for more information, visit [michigan.gov/ifta](http://michigan.gov/ifta) or contact our office at 517-636-4580 or [IFTA\\_Licensing@michigan.gov](mailto:IFTA_Licensing@michigan.gov). Deaf, hearing or speech impaired persons should call 517-636-4999.

PART 1: BUSINESS INFORMATION		
Taxpayer ID (FEIN or TR Number)	IPC Account Number	Company or Owner/Operator Name
Old Mailing Address		New Mailing Address
Old Physical Address		New Physical Address
PART 2: OFFICER INFORMATION		
<input type="checkbox"/> Check this box if there are <b>no changes</b> to officer information		
<input type="checkbox"/> Check this box if all corporate officers are located at the new physical address		
Officer Name and Title	Old Physical Address	New Physical Address
Officer Name and Title	Old Physical Address	New Physical Address
PART 3: CONTACT INFORMATION		
<input type="checkbox"/> Check this box if there are <b>no changes</b> to contact information		
<input type="checkbox"/> Check this box if all contacts are located at the new physical address		
Contact Type and Name	Old Physical Address	New Physical Address
PART 4: CERTIFICATION		
<i>I certify under penalty of perjury that the information supplied here is true and complete to the best of my knowledge. I understand that if any of the statements in this form are false or misleading, the Department of Treasury may demand immediate reimbursement for any funds spent based on my statements. I further understand that if any false or misleading statements were made with intent to defraud the State of Michigan, the Department of Treasury may request prosecution to the full extent of the law.</i>		
Name (printed)		
Signature	Date	

Mail this form to: **Michigan Department of Treasury  
Special Taxes Division – IFTA  
PO Box 30474  
Lansing, MI 48909**

**Fax to: 517-636-4593**