



**Texas Department of Agriculture**  
**Supplier Submission - Motor Fuel Testing Fee**

**RFQ-800**

COMMISSIONER SID MILLER

SECTION A	<b>1 TYPE OF APPLICATION</b>				
	<input type="checkbox"/> New Business		<input type="checkbox"/> Change of Ownership – previous account number: _____		
	<b>2 BUSINESS TYPE</b>			<b>TDA USE ONLY</b>	
	<input type="checkbox"/> Corporation		<input type="checkbox"/> Sole Proprietorship	Client No.	Account No.
	<input type="checkbox"/> Limited Liability Co.		<input type="checkbox"/> Government	Date (mm/dd/yy)	Initials
	<input type="checkbox"/> Limited Partnership		<input type="checkbox"/> Organization		
	<input type="checkbox"/> General Partnership				
	<b>3 CLIENT INFORMATION</b>				
	Full legal business name (owner’s name if sole proprietor – no aliases)				
	D.B.A. (if applicable)				
Comptroller Taxpayer ID No. (In-state businesses)		Federal ID No. (Out-of-state businesses and nonprofit org. )			
<b>SOLE PROPRIETORSHIP ONLY</b>					
<input type="checkbox"/> Driver License No. _____ (required)			<input type="checkbox"/> TX		
<input type="checkbox"/> State Issued ID No. _____ (if DL is not available)			<input type="checkbox"/> Other		

  

SECTION B	<b>1 RESPONSIBLE PERSON INSTRUCTIONS</b>		
	Please list the full legal name (no aliases or nicknames) of the primary person responsible for the business, as indicated:		
	<ul style="list-style-type: none"> <li>♦ For a corporation, limited liability company, or cooperative, the president or CEO,</li> <li>♦ For a limited or general partnership, the managing partner or general manager,</li> <li>♦ For a sole proprietorship, the owner,</li> <li>♦ For any other type of business, the general manager.</li> </ul>		
	<b>2 RESPONSIBLE OFFICER, PARTNER, MANAGER, OR OWNER</b>		
	First Name	M. I.	Last Name
	Phone No. (     )     -     Ext.		E-mail
<b>3 RESPONSIBLE PERSON MAILING ADDRESS</b>			
Address			
City		State	Zip
Web Address of Business (optional)			

This document becomes public record and is subject to disclosure. With few exceptions, you have the right to request and be informed about the information that the State of Texas collects about you. You are entitled to receive and review the information upon request. You also have the right to ask the state agency to correct any information that is determined to be incorrect. (Reference: Government Code, Sections 552.021, 552.023, and 559.004.)

<b>SECTION C</b>	<b><sup>1</sup> PERSON TO CONTACT FOR FEE-RELATED MATTERS</b>		
	First Name	M. I.	Last Name
	Primary Phone ( ) - Ext.		Secondary Phone (optional) ( ) - Ext.
	Fax (optional) ( ) - Ext.		
	E-mail Address		
	<p><b>***Important Note***</b> I understand that my email address is required for the Texas Department of Agriculture to keep me informed of critical information, including licensing and regulatory updates; renewal invoices; and other important communications. Failure to provide an email address may result in my not receiving time-sensitive information that could affect my compliance with state regulations, thereby, resulting in monetary penalties.</p>		
	<b><sup>2</sup> MAILING ADDRESS</b>		
Address			
City	State	Zip	

<b>SECTION D</b>	<b><sup>1</sup> FACILITY INFORMATION</b>			
	Facility Name			
	<b><sup>2</sup> PHYSICAL ADDRESS OF LOCATION</b>			
	Address (No P.O. Box)			
	City	State	Zip	County
Directions to Physical Location if address above is difficult to find				

<b>SECTION E</b>	<b><sup>1</sup> OUT-OF-STATE SUBMISSIONS ONLY</b>		
	<p>A submitter of a Supplier - Motor Fuel Testing Fee whose principal place of business is situated outside the State of Texas must appoint and designate a resident citizen of Texas as said submitter’s resident agent within Texas. If address provided in Section B is out of state resident agent information is <b>REQUIRED</b>.</p>		
	Who do you wish to designate as resident agent? <input type="checkbox"/> The Texas Secretary of State <input type="checkbox"/> Other (list below)		
	Resident Agent Name		
	Resident Agent Address		
City	Zip	Business Phone ( ) -	

<b>SEC. F</b>	<b><sup>1</sup> SUPPLIER - MOTOR FUEL TESTING FEE</b>
	Motor Fuel Testing Fee - \$1,500

<b>SECTION G</b>	<b><sup>1</sup> PAYMENT</b>	
	Method of Payment (payable to Texas Department of Agriculture)	
	<input type="checkbox"/> Check # _____ <input type="checkbox"/> Cashier's Check # _____ <input type="checkbox"/> Money Order # _____	
	Amount remitted \$	Mail to: Texas Department of Agriculture P.O. Box 12076, Austin, TX 78711-2076
<b>TDA USE ONLY</b>	Receipt No.	Date Receipt Issued

<b>SECTION H</b>	<b><sup>1</sup> SIGNATURE</b>	
	Submitter Name	Title
	Submitter Signature	Date      /      / month    day    year

<b>SECTION I</b>	<b><sup>1</sup> CHECKLIST</b>
	Please use this checklist to ensure you are sending all of the necessary information and documents.
	<input type="checkbox"/> Supplier Submission - Motor Fuel Testing Fee Form RFQ-800 <input type="checkbox"/> Fee
<b>Please note that an incomplete submission may result in processing delays.</b>	