



MF-627
State Form 49115
(R7 / 8-20)

Indiana Department of Revenue
Cancellation of Fuel License

Mailing/Contact Information

Indiana Department of Revenue
P.O. Box 6114
Indianapolis, IN 46206-6114
(317) 615-2630
fetax@dor.in.gov

Legal Name		Federal Employer Identification Number (FEIN) or License Number/Tax Identification Number (TID)	
DBA Name			
Street Address			
City	State	ZIP Code	
Telephone Number	Email Address		

Please check the box for each license/permit you would like to cancel.

Check Box	License/Permit Type	Effective Date of Cancellation
<input type="checkbox"/>	Aviation Fuel Dealer/Exemption Permit	
<input type="checkbox"/>	Aviation Fuel Excise Tax	
<input type="checkbox"/>	Dyed Fuel User	
<input type="checkbox"/>	Gasoline Distributor	
<input type="checkbox"/>	Gasoline Transporter	
<input type="checkbox"/>	Gasoline Use Tax	
<input type="checkbox"/>	Marina Fuel Dealer/Exemption Permit	
<input type="checkbox"/>	Oil Inspection Fee Distributor	
<input type="checkbox"/>	Petroleum Severance Reporter	
<input type="checkbox"/>	Propane Dealer	
<input type="checkbox"/>	Special Fuel Blender	
<input type="checkbox"/>	Special Fuel Eligible Purchaser	
<input type="checkbox"/>	Special Fuel Exporter	
<input type="checkbox"/>	Special Fuel Importer	
<input type="checkbox"/>	Special Fuel Permissive Supplier	
<input type="checkbox"/>	Special Fuel Supplier	
<input type="checkbox"/>	Special Fuel Terminal Operator	
<input type="checkbox"/>	Special Fuel Transporter	

I have notified the bond/surety company that any associated bonds should be cancelled.

Printed Name

Signature

Date