

**CENTRAL PERMITS  
KANSAS FUEL APPLICATION**

**KS FUEL  
APPLICATION**

**(The resulting permit OR documents may not be transferred to another owner)**

<b>MAILING ADDRESS</b>	<b>FEE</b>	<b>\$13.00-24 Hour \$25.00-72 Hour</b>	<b>START DATE:</b>	<b>U.S.DOT #</b>
Central Permits	Phone	785-368-6501	Customer	_____
Docking State Office Building	Fax	785-296-6558	Address	_____
915 SW Harrison Room150			City	_____ State _____ Zip _____
Topeka, Kansas 66612			Phone	_____ Fax _____
			Email	_____

**(Providing an email address will enhance communicating with our customers)**

PAYMENT OPTIONS					CREDIT CARD INFORMATION				
Method	Cash	Check	Escrow	Escrow #	Credit	VISA	MASTER CARD	AMEX	DISCOVER
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
<b>CREDIT CARD NUMBER</b>						<b>EXPIRATION DATE</b>			

VEHICLE INFORMATION								
VIN (Last 5 digits)	TYPE	FUEL PERMIT	UNIT #	YEAR	MAKE	STATE	LICENSE #	RGVW
	T <input type="checkbox"/> TT <input type="checkbox"/> SME <input type="checkbox"/>	24 Hour <input type="checkbox"/> 72 Hour <input type="checkbox"/>						