

**IFTA-2**

Additional Decal Request Form



14123588880101

Legal name		Federal employer identification number	
Business name (if different from above)			
Physical address	City, town or post office	State	ZIP code
Mailing address (include apt., office or unit #, if any)	City, town or post office	State	ZIP code
Contact name for questions regarding this decal order		Telephone number	
		(      )	-
E-mail address			

===== INSTRUCTIONS =====

1. Print or type all information clearly.
2. This form is to be used to order **ADDITIONAL DECALS ONLY**.
3. Be sure to indicate your Federal Employer Identification number on the applicable line.

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**Additional Decal Order**

**Number of vehicles.....** \_\_\_\_\_



Legal name	Federal employer identification number

**VEHICLE IDENTIFICATION NUMBERS**

For each IFTA decal requested, please provide the plate number, state of registration, and the vehicle VIN number for each IFTA qualified vehicle.

**You will receive a decal for each vehicle listed.**

	Plate Number	State of Registration	Vehicle Identification Number (VIN)
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			
13			
14			
15			
16			
17			
18			
19			
20			

Please attach additional sheet(s) if needed. Taxpayer spreadsheets containing the above requested information will be accepted in lieu of this form.