



ARKANSAS MOTOR FUEL TAX BOND

AMFT - 40 B

1. Bond No.	2. Total Amount of Bond (for each license or permit)	3. Effective Date of Bond		
		Month	Day	Year

4. Do you hold or previously held an Arkansas Motor Fuel Tax License? ___ Yes ___ No If yes, give a number _____	5. Federal ID Number or SSN _____
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6. NAME AND ADDRESS AS SHOWN ON APPLICATION

Legal Name	Trade Name
Physical Address	Mailing Address
City State Zip Code	City State Zip Code

7. Indicate fuel tax accounts covered by this bond and amount

Interstate Fuel User _____ Gasoline Distributor _____ Dealer Bond _____

Natural Gas _____ SSSSSSSSSSS_ Diesel Supplier _____ LPG Supplier _____

8. NAME AND MAILING ADDRESS OF SURETY COMPANY

Name	Telephone No.
Street or Mailing Address	
City	State Zip Code

CONDITION OF BOND

For valuable consideration, we the above individual or firm, as principal, and the above named Surety jointly and severally are held firmly bound unto the State of Arkansas Department of Finance and Administration, in the penal sum shown above, lawful money of the United States, for the payment of which we hereby bind ourselves, heirs, assigns, successors, executors, and administrators, firmly by these presents.

The principal has made application to the Department of Finance and Administration, State of Arkansas for or holds license(s) or permit(s) as indicated in this bond. If the principal shall pay all taxes, penalty, and interest due or to become due under the laws of Arkansas relating to such tax programs under the Ark. Code Ann. Section 26-55-101 (1987) et seq., as amended and Ark. Code Ann. Section 26-56-101 (1987) et seq., as amended, and shall comply with all the provisions thereof, and the regulations issued thereunder, then this obligation shall be void; otherwise, the same shall be and remain in full force and effect. The obligation of this bond shall begin on the effective date indicated above until terminated as provided herein.

It is expressly understood and agreed that the Commissioner may maintain any action under this bond against the SURETY without making the PRINCIPAL, a party thereto; that the SURETY shall have the right to terminate its liability under this bond only giving to the Commissioner sixty (60) days written notice of its intention to terminate, but said SURETY shall remain liable for all taxes, interest, and penalties due under the provisions of this bond up to and including the effective date of such termination of liability. Written notice of termination shall be mailed to the Department of Finance and Administration, Motor Fuel Tax Section, PO Box 1752, Little Rock, Arkansas, 72203, by certified mail, return receipt requested.

EXECUTED THIS _____ DAY OF _____, _____

_____	_____
Signature of Attorney-In-Fact	Signature of Principal
	Subscribed and sworn to before me this

_____ day of _____, 20_____

_____	_____
Name of Agency	Notary Public
	Notary Seal

(All Sections Must Be Completed)

PLEASE FORWARD TO SURETY COMPANY

This bond form is designed for use by individuals or companies wishing to obtain Motor Fuel Tax License with the State of Arkansas.

Please review the following guidelines prior to completion of bonds, so it will not be necessary to return for corrections.

1. Must be completed by Surety Company.
2. Total amount of bond in space #2 will be determined by the total of the bond amounts in space #7. All bond amounts will be determined by the Motor Fuel Tax Section and if a bond amount has not been entered, it will be necessary to contact this office.
3. Effective date of bond.
4. If this is a replacement bond, please give your account number.
5. Federal ID or Social Security Number required.
6. Name and physical address must be identical on Surety Bond and Application.
7. Type (s) of account (s) covered by this bond.
8. Surety Company information.

If new account, completed bond must be returned to Principal to be mailed with Application.

If you have any further questions pertaining to the bond form, please contact our office.

Motor Fuel Tax Section
PO Box 1752
Little Rock, AR 72203
(501) 682-4800