

CALIFORNIA STATE BOARD OF EQUALIZATION
**FUEL TAX EXEMPTION CERTIFICATE
FOR DIESEL FUEL AND MOTOR VEHICLE FUEL
TRAIN OPERATORS**

SECTIONS 60106 AND 7403, REVENUE AND TAXATION CODE

Questions on the completion or use of this form should be directed to the Fuel Taxes Division, MIC:30, Board of Equalization, PO Box 942879, Sacramento, CA 94279-0030, telephone 916-322-9669.

CERTIFICATE NUMBER

EFFECTIVE DATE

SELLER NAME

ADDRESS *(street, city, state, zip code)*

SUPPLIER LICENSE NUMBER

FEDERAL EMPLOYER IDENTIFICATION NUMBER (FEIN)

I, the undersigned, certify that, to the best of my knowledge, the information I have provided on this form is true and correct; that all diesel fuel and/or motor vehicle fuel purchased under this certificate is for operation of a train powered by diesel fuel or motor vehicle fuel, as defined in Revenue and Taxation Code sections 60042 and 7342, or for other tax-exempt use; and that I am the purchaser or authorized to sign this certificate as an agent of the purchaser.

By signing this certificate I acknowledge my understanding that if any diesel fuel or motor vehicle fuel purchased with this certificate is sold or otherwise used in a taxable manner, I am required to report and pay the diesel fuel or motor vehicle fuel taxes on this fuel promptly at the time of sale or use. I also understand that the law provides civil and criminal penalties for fraudulent use of this certificate.

PURCHASER NAME *(print full name)*

TITLE

SIGNATURE

DATE

COMPANY NAME

BUSINESS ADDRESS *(street, city, state, zip code)*

TRAIN OPERATOR LICENSE NUMBER

FEDERAL EMPLOYER IDENTIFICATION NUMBER (FEIN)

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