72A304 (4-21) Commonwealth of Kentucky **DEPARTMENT OF REVENUE** 

## **MOTOR FUEL TAX ELECTRONIC FILING APPLICATION**



Company Name  Mailing Address			Application Date				
			City		State ZIP Code		<del></del>
FEIN Number Phone Number		one Number	Fax Number				
lectronic Filing Contact Person Contact Person			Phone Number Contact		Person Email Address		
• WEB DIRECT FILLABLE FORMS via the Web. Using this option allow     • EDI FILING METHOD: EDI filin ANSIX.128134030 format or an A also have Web Direct access to view of the KY DOR Motor Fuel Tax e-File system of the KY DOR Motor Fuel	ows you to g allows SCII forma ew and up must caref stem. To o	o enter all data re you to extract of at and transmit it odate the transmi fully consider the	quired on the tax rel data from your inte to the KY DOR Moto ted data before con option you are sele ions you must comp	urn and the sum and the sum and compute or Fuel Tax e-Fupleting their functing to file you lete, sign, and	upporting so er system, ille system. illing require our Fuel Tax	format it into In addition, thi ements.  returns electre ew application	either a is user wi onically t
		Create	Send	Pay	.	Enter Bank	1
User Name		Returns	File	'			All
User Name		Returns		Return		Information	All
User Name		Returns		'			All
User Name		Returns		'			All
User Name		Returns		'			All
User Name		Returns		'			All