



Massachusetts Department of Revenue  
**Form IFTA-1**  
**International Fuel Tax Agreement**  
**Massachusetts License Application**

**2023**

**Registration period January 1, 2023 through December 31, 2023.**

Federal Identification number	Social Security number	U.S. Department of Transportation number	
Legal name of business	Trade name (DBA)		
Physical address of business	City/Town	State	Zip
Mailing address	City/Town	State	Zip
Office where fuel records are available for audit (if different from business address or mailing address)		Business phone	
Name of representative or agent (include Form M-2848, Power of Attorney)		Phone	
<input type="radio"/> Yes <input type="radio"/> No			
Type of business			
<input type="radio"/> Corporation <input type="radio"/> Individual <input type="radio"/> Partnership <input type="radio"/> Other (specify)			

**Principal officers.** This section must be completed in full.

Title	Name	Social Security number	Residential address

**Principal officers**

Registration type	Start date in IFTA program
<input type="radio"/> Renewal <input type="radio"/> Additional	

**Fuel type.** Fill in all that apply.

- Diesel    Gasoline    Ethanol    Propane (LPG)    Biodiesel    LNG    Gasohol    Methanol    CNG    A-55    M-85  
 Electricity    Hydrogen

**Decal order and application fee**

1 Number of IFTA vehicles .....	1	
2 Cost per vehicle .....	2	\$ 8.00
3 Total due. Multiply line 1 by line 2 .....	3	

Be sure to complete page 2.



**Jurisdictions.** Fill in oval for any jurisdiction in which you travel.

- AL – Alabama
- AZ – Arizona
- AR – Arkansas
- CA – California
- CO – Colorado
- CT – Connecticut
- DE – Delaware
- DC – District of Columbia
- FL – Florida
- GA – Georgia
- ID – Idaho
- IL – Illinois
- IN – Indiana
- IA – Iowa
- KS – Kansas
- KY – Kentucky
- LA – Louisiana
- ME – Maine
- MD – Maryland
- MA – Massachusetts
- MI – Michigan
- MN – Minnesota
- MS – Mississippi
- MO – Missouri
- MT – Montana
- NE – Nebraska
- NV – Nevada
- NH – New Hampshire
- NJ – New Jersey
- NM – New Mexico
- NY – New York
- NC – North Carolina
- ND – North Dakota
- OH – Ohio
- OK – Oklahoma
- OR – Oregon
- PA – Pennsylvania
- RI – Rhode Island
- SC – South Carolina
- SD – South Dakota
- TN – Tennessee
- TX – Texas
- UT – Utah
- VT – Vermont
- VA – Virginia
- WA – Washington
- WV – West Virginia
- WI – Wisconsin
- WY – Wyoming
- Canadian provinces:**
- AB – Alberta
- BC – British Columbia
- MB – Manitoba
- NB – New Brunswick
- NL – Newfoundland
- NS – Nova Scotia
- ON – Ontario
- PE – Prince Edward Island
- QC – Quebec
- SK – Saskatchewan

**Bulk storage**

Do you maintain bulk storage? If Yes, list the jurisdiction where the fuel is maintained.

- Yes  No

**Prior registration**

Indicate any IFTA jurisdiction(s) in which you are currently or were previously registered. (Enter "None" if you have never been registered for IFTA.)

**Important information**

Has your IFTA license ever been revoked in any IFTA jurisdiction?

- Yes  No

List any IFTA jurisdiction in which your IFTA license is currently revoked.

**Declaration**

The applicant agrees to comply with reporting, payment, record-keeping requirements to report payments, keep records and license display requirements as specified in the Massachusetts Tax Law and the International Fuel Tax Agreement. The applicant further agrees that Massachusetts may withhold any refunds due if the IFTA applicant is delinquent on payment of fuel taxes due to any IFTA member jurisdiction. Failure to comply with these provisions shall be grounds for revocation of an IFTA license in all member jurisdictions.

Under the penalties of perjury, I declare that I have examined this application, and to the best of my knowledge and belief it is true, correct and complete.

	Title	Date	Telephone
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Signature of owner, partner, member or officer from page 1

**Instructions**

Remit fees with application. Remittance must be in U.S. funds. Make check payable to **Commonwealth of Massachusetts**. Mail to **Massachusetts Department of Revenue, P.O. Box 7027, Boston, MA 02204**.

# Form IFTA-1 Instructions

Enter your Federal Employer Identification number. If one has not been issued, enter your Social Security number.

All trucks that travel interstate and weigh more than 10,000 pounds are required to have a Department of Transportation number. For further information, call 781-425-3210.

Enter the legal name of the business. The legal name is the name under which the business owns the property or acquires debt. A corporation's legal name is the name that appears on its certificate of incorporation. If the business is a partnership, the legal name is the name that appears on its partnership agreement. The legal name of a sole proprietorship is the name of the individual owner of the business.

If the company has a DBA (doing business as) name, enter that. It will be used to establish your account.

Enter the business address of the company.

Enter the mailing address to which you want your license, decals and returns to be sent.

Enter the physical place the fuel records will be available for audit.

Enter the telephone number of the company.

Fill in the appropriate oval and complete the name and full address if you are giving Power of Attorney to an outside agent or representative. You must also submit a Power of Attorney, Form M-2848.

Fill in the appropriate type of business based on the federal number.

Enter the names, titles, Social Security numbers and residence addresses of the principal corporate officers, members, partners, individual owners or executors, administrators, receivers, trustees or fiduciaries.

**Renewal.** Fill in if you have or had a license for 2022. New applicants must register online at [mass.gov/masstaxconnect](https://mass.gov/masstaxconnect). After registering for IFTA, you may log in to your account to order decals.

**Additional.** Fill in if currently licensed for 2023 and need additional decals.

Enter the date you began or will begin IFTA in Massachusetts based on the current identification number entered.

Fill in ovals for all types of fuel used.

Enter the number of IFTA vehicles you are applying for and multiply by \$8. Submit a check for resulting amount payable to **Commonwealth of Massachusetts**. Decals are not vehicle specific, and extra decals can be ordered.

Fill in the oval for all jurisdictions in which traveling will be done. Traveling must be done in Massachusetts and one other jurisdiction to qualify for IFTA.

If bulk storage is maintained, fill in Yes and enter the jurisdiction where fuel is maintained. Otherwise, fill in No.

List the IFTA member jurisdictions in which you are or have been registered for IFTA.

Fill in the appropriate Yes or No oval as to whether your IFTA license has ever been revoked. List any IFTA jurisdiction in which your IFTA license is currently revoked.

Print name, have the application signed by an authorized person and enter the title of person signing the application. The application must be signed by the owner, partner, officer or person authorized in the Principal officers section on the front of this application, accepting responsibility for the validity of the information contained in the application.

Review application to ensure that it is complete. Verify the check amount, that the mailing address is on the application and that it is signed. The application will be returned if it is not complete, which will cause delays in its processing.

For additional questions, call DOR at 617-887-6367.