



Commonwealth of Massachusetts  
Division of Standards  
1000 Washington Street, Suite 510  
Boston, MA 02118  
617-727-3480  
**FEE \$150.00**

FOR INTERNAL USE ONLY:

CHECK #: \_\_\_\_\_

ISSUE DATE: \_\_\_\_\_

ISSUED BY: \_\_\_\_\_

**LICENSE TO SELL RETAIL MOTOR FUEL AND/OR AUTOMOTIVE LUBRICATING OIL**  
**2022 APPLICATION**

This application must be completed as indicated and signed and returned to the address above with a license fee of **\$150.00** before the license can be issued. The forms of payment accepted are personal, business or bank checks, and money order. Make check or money order payable to: **Commonwealth of Massachusetts.**

**NOTE: You may also register online to pay with a credit card or electronic check at [www.mass.gov/standards](http://www.mass.gov/standards)**

Is this a renewal? Yes ☐ No ☐ If yes, please indicate your license #: \_\_\_\_\_

Please indicate previous owner (If Applicable): \_\_\_\_\_

**Business Information:**

Business Name: \_\_\_\_\_ Store Number (if applicable): \_\_\_\_\_

Legal Business Name (if different): \_\_\_\_\_

Business Address: \_\_\_\_\_

City/ Town: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Fed. Tax ID #: \_\_\_\_\_

Email Address: \_\_\_\_\_ Business Phone #: \_\_\_\_\_

**Business Contact Person:**

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_

Phone #: \_\_\_\_\_ Email Address: \_\_\_\_\_

Type of Motor Fuel: GAS ☐ OIL ☐ BOTH ☐

Brand of Motor Fuel Sold: \_\_\_\_\_ Suppliers: \_\_\_\_\_

**Have you been convicted of a misdemeanor or a felony during the past 12 months in any U.S. or foreign jurisdiction? If so, give details below.**

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**Have there been any formal complaints against you where disciplinary action was taken by the Division of Standards or any court judgment was issued against you? If so, please give details below.**

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**Have you ever been denied a professional license by any local, state or federal agency? If so, please give details below.**

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**Has any local, state, or federal agency taken any disciplinary action against any license you have? If so, please give details below.**

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**Pursuant to G.L. c. 62C, § 49A, I certify under pains and penalties of perjury that I have complied with all laws of the Commonwealth relating to taxes, reporting of employees and contractors, and withholding and remitting of child support, that I have complied with all local permit and license requirements, and that all statements contained in this application, to the best of my knowledge and belief, are true.**

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date