



New York State Department of Taxation and Finance

# Application for Additional Decals, Replacement Decal(s), Or Duplicate License

# IFTA-9

(4/09)

International Fuel Tax Agreement (IFTA)



If you are enrolled in One Stop Credentialing and Registration (OSCAR), visit us online to apply for additional decals. If you are not enrolled, sign up now (at [www.oscar.state.ny.us](http://www.oscar.state.ny.us)).

Office use only	
Total amount and number of decals	
\$	Number
Deposit number	

Identification number \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_

State \_\_\_\_\_

ZIP code \_\_\_\_\_

### Decal/license order

Calendar year: \_\_\_\_\_

Check item(s) required.	Number	Fee	Amount due
<input type="checkbox"/> Additional decals: (Two decals per vehicle)	_____	X \$4.00 (\$8.00 per vehicle)	_____
<input type="checkbox"/> Replacement decal(s):	_____	X \$4.00	_____
<input type="checkbox"/> Duplicate license:	1	X \$2.00	_____
<b>Total due</b>			\$ <input style="width: 100px;" type="text"/>

Signature _____	Title _____	Telephone number ( ) _____	Date _____
-----------------	-------------	-------------------------------	------------

## Instructions

1. Enter your current identification number and name as they appear on your IFTA license.
2. Enter the address where you wish to have the decal(s) or license sent.
3. Complete your request for decal(s) or license and compute your total due.
4. Sign and date this application. Include your title and a telephone number where you can be reached.
5. Enclose a check, in U.S. funds, for the total due (decal(s) or license will not be sent if payment is not enclosed). Make check payable to **Commissioner of Taxation and Finance**. Mail this application and check to:

**NYS TAX DEPARTMENT  
HUT/IFTA APPLICATION DEPOSIT UNIT  
W A HARRIMAN CAMPUS  
ALBANY NY 12227-0163**

**Note:** If your name, employer identification number, address, or owner/officer information has changed, you must file Form DTF-95, *Business Tax Account Update*. If only your address has changed, you may file Form DTF-96, *Report of Address Change for Business Tax Accounts*. You can get these forms from our Web site, by fax, or by phone. See *Need help?* at right.

### Need help?

**Internet access:** [www.nystax.gov](http://www.nystax.gov)  
(for information, forms, and publications)

**Fax-on-demand forms:** 1 800 748-3676

**Telephone assistance** is available from 8:00 A.M. to 5:00 P.M. (eastern time), Monday through Friday.

**Miscellaneous Tax Information Center:** (518) 457-5735  
For in-state callers without free long distance: 1 800 470-4353

To order forms and publications: (518) 457-5431  
For in-state callers without free long distance: 1 800 462-8100

**Text Telephone (TTY) Hotline** (for persons with hearing and speech disabilities using a TTY): 1 800 634-2110

**Persons with disabilities:** In compliance with the Americans with Disabilities Act, we will ensure that our lobbies, offices, meeting rooms, and other facilities are accessible to persons with disabilities. If you have questions about special accommodations for persons with disabilities, call the information center.