

Florida Department of Agriculture and Consumer Services
Division of Consumer Services



WILTON SIMPSON
COMMISSIONER

PETROLEUM WHOLESALE REGISTRATION

Section 525.19, Florida Statutes
Rule 5J-21.010, Florida Administrative Code

1-800-HELP-FLA (435-7352) • (850) 410-3800
www.FDACS.gov

Register online at:
www.FDACS.gov

or

Mail Registration to:

FDACS
Division of Consumer Services
2005 Apalachee Parkway
Tallahassee, FL 32399-6500

All documents and attachments submitted with this registration may be subject to public review pursuant to chapter 119, Florida Statutes. PLEASE TYPE OR PRINT.

Location Information

1. Location Name:

Location Address:

Corporate Owner Information

2. Corporate Owner Name:

Corporate Owner Address:

Corporate Owner Phone Number:

()

Corporate Owner Email:

Corporate Owner Name of Emergency Contact:

Corporate Owner Emergency Contact Cell Phone Number (Required): Corporate Owner Emergency Contact Email:

()

Operator Information

3. Operator Name (if different from corporate owner):

Operator Address:

Operator Phone Number:

()

Operator Email:

Operator Name of Emergency Contact:

Operator Emergency Contact Cell Phone Number (Required): ()

Operator Emergency Contact Email:

Petroleum Tank(s)

4. Petroleum Tanks at this address *(Attach additional sheets as necessary using the same format.)*

Tank Identifier: _____
Fuel Type: _____
Capacity (Gallons): _____
Please provide the Conversion Chart.

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Fuel Rack

5. Fuel racks at this address. *(Attach additional sheets as necessary using the same format.)*

Fuel Rack Identifier: _____
Number of Loading Positions: _____
Fuel Type: _____

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Fuel Type: _____

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Fuel Type: _____

6. Does this facility deliver fuel by Pipeline? Yes No

If yes, provide the type of fuel: _____

Certification

I am authorized to execute this registration on behalf of the named petroleum station owner or operator.

Signature

Title and Phone Number

Print Name of Registrant

Date

Email