



COMMONWEALTH OF PENNSYLVANIA  
 DEPARTMENT OF REVENUE  
 BUREAU OF MOTOR LICENSE FUNDS  
 POST OFFICE BOX 8907  
 HARRISBURG, PA 17105.8907

**FUEL USE TAX BOND**

TO BE COMPLETED BY SURETY COMPANY

BOND # \_\_\_\_\_

**KNOW ALL MEN BY THESE PRESENTS that,** as Principal,

(1) \_\_\_\_\_  
(NAME OF DEALER-USER) (LEGAL NAME - D/B/A)

OF (2) \_\_\_\_\_  
(P.O. BOX NUMBERS — STREET AND NUMBER — CITY — COUNTY — STATE — ZIP CODE)

and (3) \_\_\_\_\_  
(NAME OF SURETY)

a corporation organized under the laws of (4) \_\_\_\_\_ and

duly authorized to engage in business in the Commonwealth of Pennsylvania, with its office for execution of this bond located

at (5) \_\_\_\_\_

in the City of (6) \_\_\_\_\_, State of \_\_\_\_\_

as **SURETY** are held and firmly-bound unto the Commonwealth of Pennsylvania in the sum of

(7) \_\_\_\_\_ dollar

(8) (\$ \_\_\_\_\_) lawful money of the United States of America, to be paid to the said Commonwealth of Pennsylvania, to which payment well and truly to be made, we bind ourselves and each of us, our and each of our heirs, executors, administrators, successors and assigns, jointly and severally, firmly by these presents.

(9) This bond to be effective as of \_\_\_\_\_ A.D.  
(MONTH DAY YEAR)

**WHEREAS**, the above bounden **PRINCIPAL** has applied for a "Dealer-User's License" under the provisions of the Fuel Use Tax Act of the Commonwealth of Pennsylvania, Act of January 14, 1952 (P.L. 1965, No. 550) (the "Act"); and

**WHEREAS**, this bond is filed with the Department of Revenue, Commonwealth of Pennsylvania, to enable said **PRINCIPAL** to obtain from the Department, under Section 3(a) and (b) of the Act, a "Dealer-User's License."

**NOW THEREFORE**, the condition of this obligation is such that if the above bounden **PRINCIPAL** shall faithfully comply with the provisions of the Act until such license in connection with which this bond is being filed is surrendered, or revoked for cause by the Secretary of Revenue before such time the **SURETY** shall be released or discharged in the manner, and to the extent provided by the Act, then this obligation shall be void; otherwise it shall remain in full force and virtue.

**AND**, in the event that the above bounden **PRINCIPAL** shall, from and after the effective date of the license aforesaid, fail in any respect to faithfully comply with the provisions of the Act aforesaid, we do hereby empower the Attorney General of the Commonwealth of Pennsylvania or any attorney of any Court of Record within the Commonwealth of Pennsylvania or elsewhere, to appear for and enter judgment against us or either of us, our or either of our heirs, executors, administrators, successors or assigns, for all unpaid tax, interest, penalty, fines, and costs of collection up to the above sum, release of all errors and without stay of execution. And we waive the right of inquisition on any real estate which may be levied upon to collect the above sum, and we do hereby voluntarily condemn the same and authorize the prothonotary to enter upon the fieri facias our said voluntary condemnation. And we further agree that said real estate may be sold on a fieri facias, and hereby waive and release all relief from any and all appraisalment, stay or exemption laws of any state now in force or hereafter to be passed. And for the entering of such judgment this shall be the sufficient warrant for any such attorney, and a copy of this Bond and Warrant being filed in said action, it shall not be necessary to file the original as warrant of attorney, any law or rule of court to the contrary notwithstanding.

(10) Signed, sealed, and delivered this \_\_\_\_\_ day of \_\_\_\_\_ A.D. \_\_\_\_\_.

In Witness whereof this instrument has been duly executed by the above-named principal and surety the day and year above written.

(11) INCORPORATED DEALER-USER: SIGN BELOW

(Corporate Seal)

ATTEST

_____		Corporate Name
Secretary	Social Security Number	By _____
_____	_____	President Social Security Number
Print Name	_____	Print Name

(12) INDIVIDUAL, PARTNERSHIP AND ASSOCIATION DEALER-USER: SIGN BELOW

Signature	Print Name	Title	Social Security Number
_____	_____	_____	_____
Signature	Print Name	Title	Social Security Number
_____	_____	_____	_____
Signature	Print Name	Title	Social Security Number
_____	_____	_____	_____

WITNESSES: SIGN BELOW

Signature	Print Name
_____	_____
Signature	Print Name
_____	_____

(13) SURETY: COMPLETE BELOW

Name of Surety \_\_\_\_\_ By Attorney-in-Fact \_\_\_\_\_

ATTEST \_\_\_\_\_

Print Name \_\_\_\_\_

(Corporate Seal)

DO NOT WRITE IN THIS SPACE

DEPARTMENT OF REVENUE

Accepted this \_\_\_\_\_ day \_\_\_\_\_ A. D. \_\_\_\_\_

By \_\_\_\_\_  
Authorized Signature

I hereby certify on this date \_\_\_\_\_ that the company acting as surety on the within bond is licensed to do a surety business in Pennsylvania and that the agent whose name appears hereon is a licensed resident agent approved by the Insurance Department of the Commonwealth of Pennsylvania.

For Insurance Commissioner