



TAX INFORMATION

Date: _____

Company Name _____
Physical & Mailing Address _____

Phone # () _____ Fax # () _____

Tax Department Contacts:

Name _____	Name _____
Email _____	Email _____
Phone # () _____	Phone # () _____

Name _____	Name _____
Email _____	Email _____
Phone # () _____	Phone # () _____

Tax Information:

Federal ID # _____ State ID # _____
Gasoline Supplier/Distributor Registration # _____
Special Fuel Supplier/Distributor Registration # _____
Environmental/Cleanup Fee Registration # _____

Please Provide:

- Applicable Federal 637 Notification Certificates (with I.R.S. registration number)
- Sale/Use Tax Certification (exemption, resale, etc.)
- Any other tax information that we may need such as if you are registered, but prefer not to be charged certain taxes
- Copy(s) of Motor Fuel Licenses where fuel will be purchased (need license #, where state may not list it on fuel license website)
- Completed Form W-9

HF Sinclair Tax Department Contacts:

Katie Drilling
(214) 871- 3448
Katie.Drilling@hfsinclair.com

Beverly Duncan
(214) 871- 3580
Beverly.Duncan@hfsinclair.com

Leslie Simmons
(214) 871- 3853
Leslie.Simmons@hfsinclair.com