

## Racing Fuel Certificate

Please complete all pertinent information. Fax to (760) 355-7966 or mail to 350 W. Aten Rd., Imperial, CA 92251

Account #		_ (for any and all cards issued to this account #)	
Brand,	, Name and Grade of Fuel		
1.	. Name		
2.	. Address		
3.	. Phone Number		
4.	. Is the fuel being purchased for use in (IF YES SKIP LINES 5 – 11 AND SIGN BE		Yes
5.	Is the vehicle to be fueled registered for On-Road use? Yes No (IF YES, YOU MUST USE CARB APPROVED "STREET LEGAL" ON-ROAD FUELS ONLY)		
6.	. Is the vehicle to be fueled registered	for Off-Road use?	Yes No
7.	License number and Vin #, if any, of vehicle to be fueled:		
8.	Name of Sanctioned Racing Event(s):		
9.	Date(s) of Sanctioned Racing Event(s):		
10.	0. Name of Racing Association or Sanc	tioning Body:	
11.	1. Racing Association or Sanctioning B	ody Membership Number:	
or racinacknow	by acknowledge, under penalties of law cing vehicles for testing, practice, or ac wledge receipt of CARB Advisory Numb g vehicles, boats or airplanes. I agree Law for any unlawful use of the fuel proc	ctual competition for and during ber 397. State Law prohibits the to indemnify and hold harmless	a sanctioned race event. I use of this fuel other than in for any and all violations of
Read ar	and understood by:		
	Printed Name:		
	Signature:		
	Date:		