



MAIL TO:
 CENTRAL REGISTRATION - FUEL UNIT
 FLORIDA DEPARTMENT OF REVENUE
 PO BOX 6480
 TALLAHASSEE, FL 32314 - 6480

Assignment of Time Deposit

DR-157A
R. 05/05

Please complete and submit an original form for each fuel product type or taxable pollutant. This form must be executed by the financial institution which holds the assigned time deposit. An applicant cannot be issued a fuel license by the Department until the proper security is submitted. An importer's bond is required in addition to a wholesaler's bond pursuant to Rule 12B-5.030, F.A.C. If further information is needed, please contact Central Registration at 850-488-4772.

For value received, _____ as assignor, assigns to the
(Name of applicant)
 Florida Department of Revenue as assignee all of its rights, titles, and interest in and to the principal sum of the certificate of deposit, certificate number _____, issued to the undersigned for a time period of _____ months by _____
(Financial institution name)
 located at _____ as Depository
(Financial institution address)

(Financial institution FEIN)

Interest or dividends on such principal sum shall be credited and paid monthly to the assignor. This assignment includes any substitutions, renewals, and additions to the account.

This assignment is made as security in lieu of the bond required by Chapter 206, Florida Statutes, on fuel taxes payable to the Florida Department of Revenue and shall continue in force until released and discharged by the assignee, as provided by law. The assignor is engaged in business subject to the Florida Statute identified below: (Please check the appropriate box.)

- Motor fuel pursuant to Chapter 206, F.S. Alternative fuel pursuant to Chapter 206, F.S.
- Diesel fuel pursuant to Chapter 206, F.S. Importer's bond pursuant to section 206.051, F.S.
- Aviation fuel pursuant to Chapter 206, F.S. Pollutants tax pursuant to Chapter 206, F.S.

Assignee is hereby authorized to charge against the above principal of deposit account any and all fuel taxes which have been or may be incurred after _____ together with any and all penalties and interest thereon.
(Day/Month/Year)

Assignee may not by any inference or right charge against this deposit account any tax, penalty, interest, or any other charge pertaining to the assignor's operations prior to _____.
(Day/Month/Year)

Depository must pay the full principal amount to the assignee upon demand and such payment shall constitute an acquittance of depository. The depository shall not pay any portion of the principal balance to the assignor until all obligations under Chapter 206, F.S., have been met and verified in writing by the assignee.

This *Assignment of Time Deposit* shall be effective as of the _____ day of _____, _____.
(Month) (Year)

Signed by: _____ Imprint Corporate Seal here:
(Authorized signature of assignor)
 Date: _____
 Title: _____

Acknowledgement of Depository: The signatures as shown above compare correctly with our files. The above assignment will be honored and has been properly recorded on our ledger. The present balance is \$ _____.

(Officer signature) (Date)

For Department of Revenue Use Only		
Accepted: _____ <small>(Date)</small>	By _____ <small>(Name/Title)</small>	Account No.: _____