# Oklahoma Alternative Fuels Equipment Technician Application Alternative Fuels Program www.oklahoma.gov/labor

#### OKLAHOMA DEPARTMENT OF LABOR

409 NE 28th St Oklahoma City, OK 73105 405-521-6100/888-269-5353

	APPLICATION TYPE  New  APPLICATION FEE  \$50.00 per fuel type		Please make your Check, Money Order or Cashiers Check payable to ODOL FEE IS NON-REFUNDABLE		
L New					
REQUIRED DOCUMENTATION FO	R NEW APPLICANTS	NON-LLS CITI	7ENC.		
<ul> <li>U.S. CITIZENS:</li> <li>Affidavit of Lawful Presence, signed</li> <li>A valid, unexpired Driver's License of Identification Card or Military ID AI</li> <li>Birth Certificate or Social Security of passport or OR A W-2 form from curred</li> <li>Passing score from state approved straining program for written examal</li> </ul>	<ul> <li>NON-U.S. CITIZENS:</li> <li>Verification of Immigration Status</li> <li>Affidavit of Lawful Presence, signed</li> <li>A valid, unexpired Driver's License OR State Issued Photo-Identification Card OR Military ID AND</li> <li>Birth Certificate OR Social Security Card OR A valid, unexpired passport OR A W-2 form/1099 form from current employer</li> <li>Passing score from state approved school/apprenticeship training program for written exam and skills test</li> </ul>				
All new applicants must appear IN Pl *"If a person holds a valid Class I Dealer Per the Oklahoma Statutes, the requirements o submitted.	mit properly issued by the Oklah	partment of Labo	r or approved facility eum Gas Board, pursuant	to Section 420.4 of Title 52 of	
Please identify fuel system work to be portable: ☐ CNG ☐ LNG	erformed	☐ Othe	r	_	
APPLICANT INFORMATION					
Name:		Social Securit	y Number:	Date of Birth:	
Mailing Address:	Cit	y	State	Zip Code:	
Phone #: ( )	E-mail Addre	ss:			
EMPLOYER INFORMATION					
Company:			Company License #:		
Company Address:	Cit	У	State	Zip Code	
Company Phone #: ( )					
Company Phone #: ( )					
Company Phone #: ( )  Signature of Owner/Manager		DATE			
	or Reserves, or transferred f ming off Active Duty/transfer	ged from the Armec rom another state t	to Oklahoma?   Yes	States, coming off Active Duty □No	
Signature of Owner/Manager  MILITARY STATUS:  *Within the past six (6) months, have as a member of the National Guard If yes, provide date of discharge/co	or Reserves, or transferred f ming off Active Duty/transfer nember of the Armed Forces	ged from the Armed rom another state t :: of the United State	to Oklahoma?	□No	
Signature of Owner/Manager  MILITARY STATUS:  *Within the past six (6) months, have as a member of the National Guard If yes, provide date of discharge/co  *Are you a spouse of an active duty moderate in the spouse of the National Guard It yes, provide date of discharge/co	or Reserves, or transferred f ming off Active Duty/transfer nember of the Armed Forces	ged from the Armed from another state to the United States ement shall be cause	to Oklahoma?	□No	
Signature of Owner/Manager  MILITARY STATUS:  *Within the past six (6) months, have as a member of the National Guard If yes, provide date of discharge/co  *Are you a spouse of an active duty moderate in the spouse of the National Guard It yes, provide date of discharge/co	or Reserves, or transferred f ming off Active Duty/transfer tember of the Armed Forces rect. Any false or fraudulent stat	ged from the Armed from another state to the United States ement shall be cause	to Oklahoma?	$\square$ No tion of the certification held.	
Signature of Owner/Manager  MILITARY STATUS:  *Within the past six (6) months, have as a member of the National Guard If yes, provide date of discharge/co  *Are you a spouse of an active duty manager of the National Guard If yes, provide date of discharge/co  *Are you a spouse of an active duty manager of the National Guard It yes, provide date of discharge/co  *Applicant Signature /	or Reserves, or transferred fining off Active Duty/transfer member of the Armed Forces exect. Any false or fraudulent state APPLICATION CANNOT BE PROPINED TO THE PROPINED TO	ged from the Armed from another state to the United States ement shall be cause	to Oklahoma?	$\square$ No tion of the certification held.	



### Affidavit of Lawful Presence Occupational Licensing Program www.oklahoma.gov/labor

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## AFFIDAVIT OF LAWFUL PRESENCE BY PERSON MAKING APPLICATION FOR A LICENSE, PERMIT, OR CERTIFICATE

(check which of the following statements apply):	hat one of the following statements is true and correct			
☐ I am a United States citizen.				
☐ I am a qualified alien under the Federal Immigration	and Nationality Act and lawfully present in the United States.			
Alien or Admission Number:				
I state under penalty of perjury under the laws of Oklahoma that the forgoing is true and correct and that I have read and understand this form and executed it in my own hand.				
Date:	Signature:			
City & State:	Print Name:			
If applying to renew a license, permit, or certificate, please write the number:				

## INSTRUCTIONS FOR USE OF THE AFFIDAVIT OF LAWFUL PRESENCE BY PERSON MAKING APPLICATION FOR A LICENSE, PERMIT, OR CERTIFICATE

The person signing this form must read these instructions carefully

- If the person executing this form is receiving services and not making an application for a license, permit, or certificate, this form should **not** be used, but rather, either the form titled "Affidavit of Lawful Presence by Parent or Guardian Receiving Services", or the form titled "Affidavit of Lawful Presence by Person Receiving Services" should be used.
- 2. If the person executing this form is a citizen of the United States, then that person should check the box to the left of the statement "I am a United States citizen". If the person executing this form is not a citizen of the United States, but is a qualified alien under the Federal Immigration and Nationality Act, and is lawfully present in the United States, then that person should check the box to the left of the statement "I am a qualified alien under the Federal Immigration and Nationality Act and lawfully present in the United States".
- 3. In the space after the word "*Date*", the person executing this form should write today's date. In the space after the words "*City & State*", the person executing this form should indicate the city and state where they are actually located when they sign this form.
- 4. Within the context of the execution of this form, the term "penalty of perjury" means the willful assertion of the fact of either United States citizenship or lawful presence in the United States as a qualified alien, and made upon one's oath or affirmation and knowing such assertion to be false. Making such a willful assertion on this form knowing it to be false is a crime in Oklahoma, and may be punishable by a term or incarceration of no more than five (5) years in prison. Additionally, one who procures another to commit perjury is guilty of the crime of subornation of perjury and may be punished in the same manner as he would be if personally guilty of the perjury so procured.