



Florida Department of Agriculture and Consumer Services  
Division of Consumer Services, Bureau of Compliance

**BRAKE FLUID REGISTRATION APPLICATION**

Section 526.51, Florida Statutes  
Rule 5J-24.002, Florida Administrative Code

(850) 617-7150 • (850) 410-3804 Fax

**Permit Period:**  12 months (\$50)  24 months (\$100)

A \$25 penalty is assessed on any renewal application postmarked after the expiration date

Remit Non-Refundable  
Application Fee Online at:  
www.FDACS.gov

- or -

Check or Money Order  
payable to FDACS and remit  
to:

FDACS  
P.O. Box 6700  
Tallahassee, FL 32314-6700

**NICOLE "NIKKI" FRIED  
COMMISSIONER**

Brand Name \_\_\_\_\_

Applicant \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone (\_\_\_\_) \_\_\_\_\_ Email \_\_\_\_\_

Name and Address of owner of above Brand Name:

\_\_\_\_\_  
\_\_\_\_\_

Applicant is owner of brand name

Applicant is not owner of brand name\*

Resident Agent in Florida: \_\_\_\_\_  
(Name and Address)

\*Notarized affidavit from owner permitting applicant to register brand name is attached. (The affidavit must include all affected brand names, the owner's company or corporate name and address, the applicant's company or corporate name and address, and a statement from the owner authorizing the applicant to register the product with the Florida Department of Agriculture and Consumer Services.)

**Check one:**

- Applicant has complete control over this brand/formula sold in Florida.
- Notarized affidavit confirms owner has complete control over this brand/formula sold in Florida.

**Check one:**

- This is a First Time Registration Application. (See Note Below)
- This is a Formula Modification or Addition Application. (See Note Below)
- This is a Renewal Registration Application. (Please attach a set of labels, front and back. Check the box below if there have been no changes to the original label filed with the department.)
- There have been no changes to the label.

**NOTE:** Please attach a certified report from an independent testing laboratory, dated no more than 6 months before submission of this application, for all brand/formula combinations and a set of labels, front and back. See section 526.51, F.S. for requirements.

**Formula Name** \_\_\_\_\_

\_\_\_\_\_  
(Signature)

\_\_\_\_\_  
(Please print name)

\_\_\_\_\_  
(Title)

\_\_\_\_\_  
(Date)

F & A Use Only
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Org Code: 42 10 06 25 000	
EO: A2	
Object Code :	\$ 50.00
Object Code: 001020	\$100.00
Object Code: 012019	\$ 25.00