

APPLICATION FOR TOBACCO SALES CERTIFICATE

State Form 51357 (R5 / 5-23)

INSTRUCTIONS:

- 1. Please type or print legibly.
- Complete all questions.
 Include payment.
- 4. Please attach a Certificate of Existence from the Indiana Secretary of State.

INDIANA ALCOHOL AND TOBACCO COMMISSION 302 West Washington Street, Room E-114 Indianapolis, IN 46204 Telephone: (317) 232-2430 http://www.in.gov/atc

SECTION 1: GENERAL INFORMATION								
Name of applicant (individual or business entity) Doing business as (d/b/a)								
Address of premises where tobacco products are sold (number, street, city, state, and ZIP code)								
Mailing address (if different) (number, street, city, state, and ZIP code)								
Name of applicant		Telephone number		E-mail address				
Address of applicant (number, street, city, state, and ZIP code)								
Check one:		Certificate number (if renewal)	ificate number (if renewal) Cer		ertificate expiration date (if renewal) (mm/dd/yyyy)			
☐ New application	☐ Renewal							
SECTION 2: BUSINESS OWNERSHIP								
			-					
Check one: Corporation (Inc.)		☐ Limited Liability Comp	any (LLC)	☐ Partnership				
□ Limi	ted Partnership (LP)	☐ Limited Liability Partne	☐ Limited Liability Partnership (LLP) ☐ Sole proprietorship		ip			
Please provide the following information for the business entity type selected above:								
<u>CORPORATION</u> – President, secretary, and all other corporate officers								
LIMITED LIABILIT	Y COMPANY – All mer	nbers and managers, including pe	ercentage of interes	st held				
PARTNERSHIP / LIMITED PARTNERSHIP / LIMITED LIABILITY PARTNERSHIP – All partners and percentage of interest held								
SOLE PROPRIETORSHIP – Owner								
Title	Name	Home Add	Iress	Date of Birth	Ownership Percentage			
		SECTION 3: OPERATION I	NEODMATION					
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For the purposes of this section, "tobacco" has the meaning set forth in Indiana Code 35-46-1-1.7 and "electronic cigarette" or "e-cigarette" have the meaning set forth in Indiana Code 35-46-1-1.5, including any device capable of delivering inhalable nicotine by a vaporized solution (including components, cartridges, and e-liquids).								
□ Yes □ No	 Do you understand that it is illegal to sell tobacco products and/or e-cigarettes (i.e., a device capable of providing an inhalable dose of nicotine by a vaporized solution, including components, cartridges, and e-liquids) to someone less than twenty-one (21) years of age? 							
□ Yes □ No	Do you understand that it is illegal for individuals less than twenty-one (21) years of age to possess tobacco and e-cigarettes (including components, cartridges, and e-liquids) under Indiana law?							
☐ Yes ☐ No	3. Do you understand that it is illegal for individuals less than twenty-one (21) years of age to access tobacco products and/or e-cigarette vending machines under Indiana law?							
□ Yes □ No	4. Do you acknowledge and understand that you must post proper tobacco signage depending on the type of tobacco vendor you are under Indiana law? <i>Please visit www.in.gov/atc/tobacco-resources/tobacco-information/</i> for additional information about required signage.							
☐ Yes ☐ No	5. Do you understand that you must check the identification of an individual that appears to be under the age of thirty (30) before selling them a tobacco or e-cigarette product (including e-liquid)?							

□ Yes	□ No	6.	Do you understand that valid forms of identification include only the following government issued photo IDs: a driver license, a state issued identification card, a U.S. passport, a U.S. military ID card, and a US immigration card?				
☐ Yes	□ No	7.	Do you understand that cigarettes must be sold in a pack or carton, and that selling single cigarettes is illegal?				
☐ Yes	□ No	8.	Do you understand that the penalty for violating certain tobacco laws may include a fine of up to \$1,000.00 per violation?				
☐ Yes	□ No	9.	Do you understand that if you sell tobacco or e-cigarette products (including e-liquids) without a valid certificate, you may be fined up to \$1,000.00?				
□ Yes	□ No	10.	. Do you understand that tobacco sales certificates must be renewed every three (3) years?				
□ Yes	□ No	11.	For new applicants: Do you understand that a new business that sells tobacco products may not operate within one thousand (1,000) feet of a public or private elementary or secondary school? (Renewal applicants may skip to Question 12.)				
☐ Yes	□ No	12.	Is your business located within one thousand (1,000) feet of a public or private elementary or secondary school?				
☐ Yes	□ No	13.	Do you understand that you must comply with the requirements of the Indiana Cigarette Fair Trade Act (IC 24-3-2 et seq.) at all times?				
□ Yes	□ No	14.	Do you understand that tobacco sales certificates must be displayed in a conspicuous location visible to the public in accordance with 905 IAC 1-46-1?				
□ Yes	□ No	15.	15. Do you consent to the entrance, inspection, and search by an enforcement officer of the licensed premises, without a warrant or other process, to determine compliance with the provisions of Title 7.1 of the Indiana Code? <i>Note: Answering "No" to this question will result in denial of this application.</i>				
☐ Yes	□ No	16.	6. In the year immediately preceding the submission of this application, has anyone with an interest in this tobacco sales certificate application had an interest in another tobacco sales certificate that was denied, revoked, or suspended?				
□ Yes	□ No	17. If the sale of tobacco products (including e-liquids) accounts or is expected to account for 85% of actual or anticipated retail sales for this location, do you understand that it is illegal to allow anyone under the age of twenty-one (21) to enter the licensed premises?					
☐ Yes	□ No	18. Do you understand that all tobacco products must be purchased from a licensed distributor or licensed wholesaler and that you must provide an invoice or documentary evidence of such upon inspection of your premises? (IC 24-3-2-4.7)					
SECTION 4: CERTIFICATION OF APPLICANT							
I hereby certify that this application was completed by myself, or the preparer identified below. I certify that I have reviewed this application form prior to signing, and that all information provided herein is true and correct. I acknowledge and understand that it is a felony under Indiana law to misrepresent or falsify any portion of this application or attached documents.							
Signature of applicant				Date signed (mm/dd/yyyy)			
Printed name				Telephone number			
CECTION 5. OF DETICATION OF DEPARTS (# # t)							
SECTION 5: CERTIFICATION OF PREPARER (if applicable)							
I hereby certify that I have examined this application and any accompanying documents, and to the best of my knowledge and belief, they are true, correct, and complete. I further certify that the applicant has reviewed the completed application form prior to signing.							
Signature of preparer				Date signed (mm/dd/yy)			
Printed name of preparer				Telephone number			
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SECTION 6: PAYMENT AND FEE							
There is a \$200.00 fee for a three (3) year certificate. You may submit payment via money order, business check, or certified check with checks made payable to the Indiana Alcohol and Tobacco Commission. DO NOT SEND CASH OR PERSONAL CHECKS. You may also apply online at www.in.gov/atc and pay with MasterCard or Visa.							