



**APPLICATION FOR
PRE-BID QUALIFICATION**

State Form 43380 (R4 / 2-17)
Approved by State Board of Accounts, 2017

ALCOHOL AND TOBACCO COMMISSION

Type of permit and unique auction permit number

NOTE: This form is for Permittee Evaluation and shall **NOT** be assumed as FINAL APPROVAL FOR ANY PERMITTEE.
INSTRUCTIONS: Mail payment, completed form, and any supporting documents to the address at the bottom of this form.

Name of county	City or area	Basic annual permit fee
<p>NOTE: Attach bid security (certified or cashiers check only) in the amount of the basic annual permit fee for the type of permit and amount indicated above (905 IAC 1-33.1-1(f)). See the fee schedule at the end of the form for more information about basic annual permit fees. Payment should be made payable to the Indiana Alcohol and Tobacco Commission.</p>		

APPLICANT INFORMATION

Name of applicant (name of person, partnership, corporation, LLC or LP who will hold the permit)		
Home address (number and street)		
City, state, and ZIP code		E-mail address
Business telephone number	Home telephone number	Will this application be for: <input type="checkbox"/> Sole Ownership <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation <input type="checkbox"/> LLC <input type="checkbox"/> LP

SOLE OWNER / PARTNERSHIP PERMIT:

<p>If applying as a sole owner or partnership for any type permit, then answer this question: (For the premises of a package store, the partnership interest must constitute a controlling interest.)</p>	
<p>1. Are you now and have been for the last five (5) years a continuous resident of the State of Indiana?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>2. If applying as a partnership, do you meet an exception to the residency requirement listed in IC 7.1-3-21-6? (If applying as a sole proprietorship, skip this question.)</p> <p>If so, please list the exception:</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>3. If applying as a partnership that does not meet the residency requirements in question one (1) or an exception in question two (2), what is your anticipated annual gross food sales for the first two (2) year period from the date the permit is issued? (IC 7.1-3-21-6(a)(10)(B) requires the anticipated annual gross food sales to be at least two hundred thousand dollars (\$200,000) by the end of the two (2) year period from the date of the issuance of the permit.) (If applying as a sole proprietorship, skip this question.) (Partnership drug store and grocery store permits are exempt from this residency requirement.)</p>	_____

CORPORATION / LLC / LP PERMIT:

<p>If applying as a corporation for any type permit, then answer this questions: (For the premises of a package store, the stock, partnership interest, or membership, must constitute a controlling interest.)</p>	
<p>1. Is at least 60% of the outstanding common stock, partnership interest, or membership owned by persons who have been continuous and bona fide residents of this State for five (5) years?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>2. Do you meet an exception to the residency requirement listed in IC 7.1-3-21-6?</p> <p>If so, please list the exception:</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>3. If applying for a retail permit that does not meet the residency requirements in question one (1) or an exception in question two (2), what is your anticipated annual gross food sales for the first two (2) year period from the date the permit is issued? (IC 7.1-3-21-6(a)(10)(B) requires the anticipated annual gross food sales to be at least two hundred thousand dollars (\$200,000) by the end of the two (2) year period from the date of the issuance of the permit.) (Drug stores and grocery stores are exempt from this residency requirement.)</p>	_____

THE ANSWERS TO THESE QUESTIONS PERTAIN TO ALL PERSONS HAVING AN INTEREST IN THIS APPLICATION. (See IC 7.1-3-4-2 and IC 7.1-3-5-2)

<p>NOTE: "Individuals" referred to in all questions in the below section include LLCs, LLPs, corporations, partnerships, and all other business structures recognized under Indiana law as well as a natural person where applicable.</p>	
<p>1. Have any individuals having an interest in this permit been convicted of a felony or a misdemeanor (other than a traffic violation)? If yes, explain and attach copy of judgement and details.</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>2. Have any individuals having an interest in this application ever been convicted of or found to have committed a violation of the Indiana Alcoholic Beverage laws, rules, regulations, or orders of the Commission? If yes, explain and attach copy of details.</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>3. Are all individuals with an interest in this application citizens of the United States?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>4. Are all individuals with an interest in this applications twenty-one (21) years of age or older?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<p>5. Are all individuals with an interest in this application of sound mind, good moral character, and good repute in the community in which they reside?</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No

6. Are any individuals with an interest in this application a law enforcement officer, or an officer of a municipal corporation, governmental subdivision, or this state charged with any duty or function in the enforcement of Title 7.1 of the Indiana Code?	<input type="checkbox"/> Yes <input type="checkbox"/> No
7. Have any individuals with an interest in this application held a permit under Title 7.1 of the Indiana Code and had the permit revoked within one (1) year prior to the date of application for a permit?	<input type="checkbox"/> Yes <input type="checkbox"/> No
8. Have any individuals with an interest in this application made an application for a permit of any type which has been denied less than one (1) year prior to this application for a permit? <i>(Unless the application was denied by reason of a procedural or technical defect.)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
9. Do any individuals, corporations, limited liability companies, limited liability partnerships, or stock owners, members, or partners of such entities have any interest either directly or indirectly, in any other permits of any kind issued under Indiana Code Title 7.1 connected with, but not limited to, the production, distribution, transportation, or sale of alcoholic beverages? <i>If yes, list permit numbers. (Attach additional sheets if necessary.)</i>	<input type="checkbox"/> Yes <input type="checkbox"/> No
Permit numbers	
I swear or affirm under penalties of perjury all of the answers given herein and on the accompanying forms and schedules are true and correct. I understand that it is a felony under law to misrepresent or falsify any portion of this application or attached documents.	
Signature of applicant	Date (month, day, year)

FEE SCHEDULE *

Permit	Fee	Statutory Authority
Beer only or wine only	\$500	IC 7.1-4-4.1-9(c)(1) (retailer); IC 7.1-4-4.1-12 (c)(1) (dealer)
Beer and wine	\$750	IC 7.1-4-4.1-9(c)(2) (retailer); IC 7.1-4-4.1-12(c)(2) (dealer)
Beer, wine, and liquor	\$1000	IC 7.1-4-4.1-9(c)(3) (retailer); IC 7.1-4-4.1-12(c)(3) (dealer)

* For information about fees for other permit types, please contact the ATC at (317) 232-2430.

Please submit this form and payment to:
Indiana Alcohol and Tobacco Commission
 302 West Washington Street, Room E114
 Indianapolis, IN 46204
For additional information:
 (317) 232-2430
www.in.gov/atc