Tab to navigate within form. Use mouse to check Clear applicable boxes, press spacebar or press Enter. **Application for Cigarette and** MUNICIPAL USE ONLY icense Number **Tobacco Products Retail License** Period Covered Submit to municipal clerk. Applicant's Wisconsin 15-digit Sales Tax Account Number Date of Issuance This must be issued in the same Legal Name of the licensee below. Legal Name (corporation, limited liability company, partnership or sole proprietorship) Federal Employer Identification No. (FEIN) Trade or Business Name (if different than Legal Name) 9201S Business Address (License Location) **Business Located In** City Village l Town Municipality State POle Mailing Address (if different than Business Address) Municipality Zip Code 5 Organization (check one) Sole Proprietor ✓ Wisconsin Corporation – Enter date incorporated: Partnership Out-of-State Corporation - Are you registered to do business in Wisconsin? No Other (describe) No 1. Does the applicant understand that they must purchase cigarettes and tobacco products only from distributors, jobbers, or subjobbers, who hold a permit with the Wisconsin Department of Revenue? No 2. Does the applicant understand that they must obtain a Tobacco Products Distributor permit if purchasing untaxed tobacco products from an out-of-state company? (Tobacco Products Distributor permit is available from the Wisconsin Department of Revenue at 608-266-6701. See application form CTP-129, revenue wi gov/dorforms/ctp-129 pdf.) No 3. Does the applicant understand that they cannot purchase/exchange cigarettes or tobacco products Yes from another retailer, including transferring existing stock to a new owner? 4. Does the applicant understand that they must provide employees with tobacco sales training approved Yes No by the Wisconsin Department of Health Services? (https://witobaccocheck.org) No 5. Does the applicant understand that they may not sell, give or otherwise provide cigarettes/tobacco products and nicotine products to minors (including electronic cigarettes containing nicotine)? 6. Does the applicant understand that they may not sell single cigarettes? No No 7. Does the applicant understand that cigarette and tobacco products invoices must be kept on the licensed premises for two years from the date of the invoice and be available for inspection by the Wisconsin Department of Revenue/law enforcement and that failure to comply can result in criminal penalties, including loss of cigarettes/tobacco products? ☑ Yes No 8. Does the applicant understand that only cigarettes and roll-your-own (RYO) tobacco products listed on the Wisconsin Department of Justice's website labeled "Directory of Certified Tobacco Manufacturers and Brands" at www.doj.state.wi.us/dls/tobacco-directory may be sold in Wisconsin? Cigarettes / Tobacco will be sold X over counter through vending machine READ CAREFULLY BEFORE SIGNING: Under penalty provided by law, the applicant states that each of the above questions has been truthfully answered to the best of the knowledge of the applicant. Applicant agrees to operate this business according to law and that the rights and responsibilities conferred by the license(s), if granted, cannot be assigned to another. Any lack of access to any por-tion of a licensed premises during inspection will be deemed a refusal to permit inspection. Such refusal is a misdemeanor and grounds for revocation of this license. Any person who knowingly provides materially false information on this application may be

Applicable Laws and Rules

This document provides statements or interpretations of the following laws and regulations in effect as of September 19, 2019: Sections 134.65, 134.66, 139.321, 139.79, 139.76, 995.10, and 995.12, Wis. Stats.

required to forfeit not more than \$1,000.

(Officer of Corporation / Member / Manager of Limited Liability Company / Partner / Individual)