

North Dakota Office of State Tax Commissioner
**Application For Alcoholic Beverage
 Manufacturing License**



For Year _____

New **Renewal**

Legal Name		ND License Number (renewals only)	
DBA/Trade Name		FEIN	
Physical Address		City	State
Mailing Address		City	State
Telephone Number		Contact Person	
<input type="checkbox"/> Address Changed From Previous License Application		Email Address	

Type of Business: Sole Proprietorship Partnership Corporation Limited Liability Corporation

Annual Fees: Initial Filers are eligible for prorated fees based on the following table:

	April - June 30	July 1 - December 31
<input type="checkbox"/> Domestic Distillery (\$100.00)	\$100.00	\$100.00
<input type="checkbox"/> Domestic Winery (\$100.00)	\$100.00	\$100.00
<input type="checkbox"/> Microbrew Pub (\$500.00)	\$375.00	\$250.00
ND Manufacturing (\$500.00)	\$375.00	\$250.00

Winery
 Distillery
 Brewery

- Do you have any financial interest in any wholesale or retail beer or liquor establishment? (If corporation, this includes all officers, directors, and stockholders; if a partnership, this includes all partners.) Yes No
 If yes, list establishments _____
- Have you ever had any type of license suspended or revoked in North Dakota or in any other state? Yes No
 If yes, list where and when _____

Agreement to Electronically File

The Tax Commissioner agrees to authorize the above named company to electronically file the tax reports and schedules as required under North Dakota Century Code chs. 5-01 and 5-03. The signature of the company affixed to this application shall be deemed to appear on such electronically filed reports and schedules, as if actually so appearing. All reports and schedules filed electronically pursuant to this agreement are deemed by the company to be truthful, accurate and complete statements made under penalty of perjury, and shall be in form compatible with the Tax Commissioner's equipment, software, and facilities. Any electronic filing not in conformity with the requirements specified herein shall be deemed a failure to file such reports and schedules and company shall be subject to all applicable penalties prescribed by law.

I declare under the penalties of North Dakota Century Code § 12.1-11-02, which provides for a Class A misdemeanor for making a false statement in a governmental matter, that this application has been examined by me and to the best of my knowledge and belief is complete, correct, and true.

 Name of Owner or Authorized Officer (print or type)

 Signature of Owner or Authorized Officer

 Title

 Date

Please send application and license fee to:

**Office of State Tax Commissioner
 Alcohol Tax Section
 600 E. Boulevard Ave. Dept. 127
 Bismarck, ND 58505-0599
 Phone: (701) 328-2702**

For Tax Department Use Only
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