North Dakota Office of State Tax Commissioner

Application For A Domestic Distillery Special Events Permit

		ND License Number	
Legal Name		FEIN	
DBA (if applicable)		Federal Basic Permit Number	
Physical Address	City	State	Zip Code
Mailing Address	City	State	Zip Code
Telephone Number	FAX Number		
Contact Person	Email Address		

There is no fee for this permit.

1. Name of special event: _____

2. Type of event (for example, trade show, convention, festival): _____

3. Number of dates requested: _____

4. Dates domestic distillery plans to participate: _____

5. Location of the special event: _____
Name of facility

_____ Address _____ City _____ State _____ Zip Code

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 to:

Office of State Tax Commissioner
Alcohol Tax Section
600 E. Boulevard Ave. Dept. 127
Bismarck, ND 58505-0599
Phone: 701.328.3158