

14. List type of tobacco products (not brands) you plan to receive for distribution or use in Alabama:

Note: If you are a wholesaler of cigarettes, you MUST complete the appropriate Application for Tobacco Stamping Permit. However, if you purchase cigarettes tax paid from another wholesaler, you would complete this application.

15. The Tobacco Master Settlement Complementary Legislation Act requires wholesalers and distributors to submit reports to the Alabama Department of Revenue that show the total number of cigarettes or in the case of roll-your-own, the equivalent stick count for which the wholesalers and distributors affixed stamps during the previous month or otherwise paid the tax due. It is unlawful for a wholesaler or distributor to stamp, sell, offer, or possess for sale cigarettes that are manufactured by a manufacturer that is not in full compliance with this Act. A wholesaler or distributor can lose their stamping privileges or registration number if they have activity with a manufacturer that is not in full compliance with the above Act and the NPM Escrow Provisions of Title 6, Chapter 12. Pursuant to the above Act, the statement below must be signed and notarized in order to complete the application process.

Under penalties of perjury, we hereby certify that we will comply fully with the provisions of the Tobacco Master Settlement Complementary Legislation Act.

Firm: _____

Name (Please Print): _____

Signature: _____

Title: _____

Sworn to and subscribed before me this the _____ day of _____, _____.

Notary Public: _____

16. Do you plan to affix the Alabama revenue stamp to cigarettes? Yes No

17. Will cigarettes be stamped with the Alabama revenue stamps? Yes No

18. Will cigarettes be stamped with the appropriate county revenue stamp? Yes No

19. List tobacco suppliers name(s) and address(es) (attach additional sheets if necessary):

20. Indicate if you are a: Wholesaler Retailer Manufacturer or Semijobber

Note: If you are a wholesaler of cigarettes, you MUST complete the appropriate Application for Tobacco Stamping Permit.

Note: *Semijobber* is defined as an entity that buys tobacco products from permitted wholesalers or obtains tobacco from other sources and sells at wholesale to licensed retail dealers for the purpose of resale only.

21. Do you sell tobacco products to persons who are reselling the product? Yes No

If Yes, you are required to file a sales for resale report.

22. List counties in which you plan to conduct business or county in which you reside if you are the consumer:

23. Are your suppliers, listed in item 19, personally soliciting your business? Yes No

24. How are deliveries of tobacco products made to you? Supplier's Vehicle Common Carrier Mail Order

Other (please explain) _____

25. Will you distribute tobacco products other than cigarettes (OTP)? If yes, you must file the required monthly state/county tobacco tax returns. Yes No

26. If out-of-state company, is your business registered with your home state? Please provide a Certificate of Good Standing.

Yes No

27. Have any of the persons shown in item 10 been convicted of a felony in Alabama or anywhere in the U.S.? Yes No

Firm: _____

Signature: _____ Title: _____

Officer of Entity (If you are a LLC, and all members Do Not sign the application, complete form TOB: LLC-AUTH)