

**TOBACCO LICENSE QUESTIONNAIRE / DISTRIBUTOR REPORTING
REQUIREMENTS**

Distributors of Cigarettes
Other Tobacco Products (cigars, smoking tobacco, plug, etc)

NAME OF BUSINESS: _____
(ENTER LEGAL NAME OF BUSINESS)

BUSINESS (OR DBA) NAME: _____
(ENTER BUSINESS (OR DBA) NAME)

COMPLETE entirely and return with your license **application**/license **renewal** form and **\$25 annual license fee** (*check or money order*) in order to have your license **Issued or Renewed** (*keep a copy for your records*).

1. What tobacco products are you going to purchase for sale?
(*i.e. cigarettes (either stamped and/or unstamped), cigars, smoking tobacco, etc*)

2. Are you going to purchase products from a licensed Arizona Tobacco Distributor (does your source of supply already pay the “luxury tax” to the State of Arizona)?

Yes _____ No _____

if **unsure**, contact your supplier and determine if they pay the “luxury tax” and **request a copy** of their **current AZ Tobacco** Distributor’s license for your records.

Note: Retailers ARE NOT required to obtain a tobacco license (* see note about business located in Tucson) to sell tobacco products, providing the “luxury tax has been paid by your supplier, retain copies of invoices for you records.

3. Where will your business be physically located, provide a **physical address; phone number** and **your business hours of operation** include days of the week (i.e. Mon to Fri) and normal business hours (i.e. 9 am to 10 pm)

4. _____
| () | _____ | _____ |
Physical Address/ Phone Number Days: (i.e. Mon to Fri) Hours: (i.e. 9 – 5)

5. If **stamping** address is different than the business address **you must** provide the address, phone number and normal hours of business.

| () | _____ | _____ |
Physical Address/ Phone Number Days: (i.e. Mon to Fri) Hours: (i.e. 9 – 5)

6. Have you previously been licensed as a tobacco distributor in Arizona?

Yes ____ No ____ *list distributor name & license number.* _____

Note: If your business is **located in Tucson**, you maybe required to obtain a tobacco retailer’s license from the city of Tucson. *Contact the City of Tucson at (520) 791-4566.*

Definition(s) of Distributorship Type:

Cigarette Distributor: a distributor (*purchaser*) of cigarettes without stamps affixed (*prior to affixing the Arizona tax stamps for distribution*) and who is required to be licensed under section §42-3201.

Cigarette Manufacturer: a distributor who manufactures, fabricates, assembles, processes or labels a finished cigarette and who is required to be licensed under section §42-3201.

Cigarette Importer: a distributor who directly or indirectly imports into the United States a finished cigarette for sale or distribution and who is required to be licensed under section §42-3201.

OTP Distributor: distributes Other Tobacco Products and/or purchases and distributes cigarettes with Arizona tax stamp already affixed.

Read and Initial each paragraph acknowledging that you have **read** and **understand** the reporting requirements for this license, if you have **any questions** please call (602) 716 – 6458.

_____ Any and all **violations** of any statute under **Arizona Revised Statutes (A.R.S.) Title 36, Chapter 6, Article 14; Title 42, Chapter 3; Title 44, Chapter 27**, or of any rule under **Title 15, Chapter 3**, of the **Arizona Administrative Code (A.A.C.)**, may result in the revocation of your Arizona Distributors license in addition to seizure of any and all untaxed tobacco products and all applicable fines. All of the statutes and codes cited in this questionnaire can be accessed through the Arizona Department of Revenue's website at www.azdor.gov.

Directory of Cigarettes (including roll your own tobacco) Approved for Stamping and Sale:

_____ Pursuant to A.R.S. §44-7111, it is **unlawful for any person** to (1) affix a stamp to a package or other container of cigarettes of a "tobacco product manufacturer" or "brand family" or (2) to sell, offer or possess for sale in this State any and all cigarettes (including roll-your-own tobacco) **NOT** listed in the Directory. The Directory is maintained on the Attorney General's website at www.azag.gov.

The directory is divided by **Participating Manufacturer's** and **Non-Participating Manufacturer's**.

_____ **Participating Manufacturer's** have agreed to and **signed the Master Settlement Agreement** as listed on the National Association of Attorney General (NAAG) web site, www.naag.org.

_____ All activity of buying and selling product from **Nonparticipating Manufacturer's** **MUST be reported** on the appropriate Nonparticipating Manufacturer's Schedules. If there is no Nonparticipating Manufacturer activity to report, then the **Certification for No Nonparticipating Manufacturer's Activity** **MUST** be completed, signed and submitted with report(s).

E-mail Address:

_____ A.R.S. §44-7111(3)(b)(5) requires that **every distributor provide**, and **update** as necessary, an electronic mail address for the purpose of receiving notifications as may be required by this Article.

Provide your e-mail address:

(Example: yourname@someserver.com)

_____ Effective **October 1, 2006** S.B. 1066 amended many of the Arizona luxury tax statutes. Please **review** the actual changes by visiting the department's website www.azdor.gov

_____ Your **Tobacco License Number** (a 6 digit number i.e. 00-0000) (*the first two digits indicate the year of the license and will change each year*) **MUST** be on all returns / schedules/ and correspondence.

_____ A.R.S. §42-3212 requires you to **include** your current tobacco license number on invoices and retain records for four years.

_____ You are required to **begin filing** report(s) / return(s) for **the month your license is issued** even when no product was received.

_____ All **Report(s) / Return(s), Schedules and Payments** must be filed each month (**even if no product was received and no tax is due**) and are **due by the 20th of each month** following the month for which the return is made. **Keep copies** of the return, transaction invoices and other records as required by statute.

_____ A.R.S. §44-3010 requires that every distributor shall **make a duplicate invoice** of the transaction, showing the date of delivery, the amount and value of each sale, shipment or consignment, and the name and location of the purchaser or person to whom delivery is made. The wholesaler or distributor shall file and **retain** the invoice as required by statute *see* A.R.S. §42-3154, subject to inspection and use by the department.

_____ Failure to file **COMPLETE** reports on a monthly basis **subjects** you to a **\$500.00 per report, per month penalty**, pursuant to A.R.S. §42-1125 (K). The sale of stamps will also be suspended and/or your license will be subject to revocation, along with assessment of any penalties applicable by law.

_____ Pursuant to A.R.S. §42-3154 it is unlawful and a **class 2 misdemeanor** for any person to knowingly **fail or refuse to permit** any lawful examination of any book, paper, account, record or other memoranda by the department, its authorized agents or employees. Civil and criminal penalties prescribed by A.R.S. §42-1125 and §42-1127 apply to violations of this chapter.

_____ Licenses are **nontransferable**. If the business is sold or terminated, the department **SHALL BE** notified in writing within thirty (30) days of the sale or termination, providing the date of sale or termination.

_____ When canceling/terminating your license you **MUST** write **“CANCELLED” and the date** across the original license and **return** it to the Department of Revenue, Tobacco Tax Section or it will not be considered cancelled and you will still be required to submit monthly reports. You must also file all required report(s) / return(s) and any applicable taxes due. Required return(s) **include** the month you cancelled.

_____ Your **Tobacco Distributor's License** must have current address. If you **move**, you are required to notify the Department of Revenue *within thirty business days*, to have a **new license issued**.

Suspended or *revoked license:

_____ Acquiring or possessing untaxed tobacco products for sale, use, or consumption in the state of Arizona **without** a tobacco distributor license is a **violation** of A.R.S. § 42-3201, which is a **class 1 misdemeanor**, pursuant to A.R.S. §42-1127 (C) (2). **Any tobacco product** found in your possession, or in any retail store determined to have been supplied by you, will be subject seized and fines assessed. See also A.R.S. §42-3204 & §42-3208.

General Disclosure/Representation Authorization:

(The Arizona Form 285 acts like a Power of Attorney – just giving the department permission to talk to or disclose information to your designated representative)

_____ Pursuant to A.R.S. §42-2001 to 2004 we are only authorized to **release or discuss information regarding taxes to specific individuals** (owner, corporate officers, etc) or their **designated representative**. (i.e. a CPA, designated employee, etc)

If you **want to give permission** for your **tobacco taxes** to be released or discussed with a designated representative, please **Complete** the enclosed General Disclosure/Representation Authorization (Arizona Form **285**), otherwise we can **ONLY** discuss specific information with the **owner(s)** or **corporate officers** of this license **as listed** on the application or license renewal.

When completing Arizona Form 285, **Check the box for Other (specify tax type)** and write **tobacco tax** in the box. Return with your license application or license renewal form, your completed questionnaire, and the license fee.

Other Tobacco Products: (*cigars, roll your own tobacco, snuff etc*)

_____ **Resident Distributors** must:

File form **819** (other tobacco products tax) report, include copies of invoice(s) as required per instructions.

_____ **Non-Resident Distributors** must:

File form **819 NR**. (other tobacco products tax) report, include copies of invoice(s) as required per instructions.

Note: If you are unsure whether you are a **Resident Distributor** or **Non-Resident Distributor** please call (602) 716 – 7808.

_____ A.R.S. §42-3208 (A) (B) (E) requires that all luxury tax **returns** for cigars or tobacco products other than cigarettes received within the state be **submitted with payment monthly** on or before the **twentieth day** of the month succeeding the month in which tax accrues. **Failure to pay the tax due** within ten days of the due date will result in penalties and interest being assessed, pursuant to A.R.S. §42-1125 & §42-1123. In addition, failure to pay the tax due within ten days of the due date may also result in the revocation of your tobacco license. **Any tobacco product** found in your possession, or in any retail store determined to have been supplied by you, will be subject seized and fines assessed

Cigarettes:

Initial if applicable, **or write N/A** if not applicable.

_____ **Resident Distributors** must:

File form **800-20** (*cigarette tax*) report, include copies of invoice(s) as required per instructions.

Do you plan to purchase and stamp for resale, cigarettes containing 25 sticks to a pack?

_____ **Yes:**

File Form **800-25** (*cigarette tax*) report, **MUST** also be filed with required copies of invoices.

_____ **No:**

You must inform the department immediately, if you begin purchasing and stamping packs of 25 for resale.

_____ **Non-Resident Distributors** must:

File form **800 NR** (*cigarette tax*) report, include copies of invoice(s) as required per instructions.

Note: If you are unsure whether you are a **Resident Distributor** or **Non-Resident Distributor** please call (602) 716 – 7808.

_____ Pursuant to A.A.C. R15-3-312 a licensed tobacco distributor **shall obtain** cigarette **stamps** from the Department and a distributor shall not sell, lend, give, or otherwise transfer tax stamps to another distributor. Violation of A.A.C. R15-3-312 can result in the **revocation** of your tobacco license. Upon revocation, **any tobacco product** found in your possession, or in any retail store determined to have been supplied by you, will be subject seized and fines assessed.

I hereby acknowledge that I **understand** the reporting requirements associated with this license.

(Signature)

(Date)

SUBMIT all five (5) pages along with license **application / renewal** and annual **license fee** (and **Arizona Form 285**, if applicable)

Any questions please call (602) 716 – 7808.