



# Tobacco Retail Dealer, Vending Machine Operator & Tobacconist Permit Application Packet

Louisiana Office of Alcohol & Tobacco Control  
Ernest Legier, Jr., Commissioner

## APPLICATION INFORMATION

For questions about or assistance with this application contact: (225)925-4041

**Who Must Complete This Application:** Any person, corporation, partnership, LLC or other organization shall complete this application and obtain a permit before selling or engaging in the business of selling cigarettes, cigars, alternative nicotine products, vapor products or other tobacco products at retail. *Note:* Louisiana issues permits per location; thus a separate tobacco retail dealer application and permit is required for **each** "place of business."

### Permit Fees

Retail Dealer Permit	\$25.00	Special Event Permit	\$25.00
Tobacconist Permit	\$100.00	Vending Machine Permit	\$5.00
Vending Machine Operator Permit	\$75.00		

*Note:* An Additional \$50.00 is due for a Responsible Vendor fee if this location does not currently possess a valid alcoholic beverage permit.

### Retail Dealer Permit Types

**Retail Dealer:** includes every dealer other than a wholesale dealer or manufacturer who sells or offers for sale cigars, cigarettes, or other tobacco products. A retail dealer permit shall be issued for each retail outlet where tobacco products are sold or offered for sale either over the counter or by vending machine.

**Tobacconist:** means any bona fide tobacco retailer engaged in receiving bulk smoking tobacco for the purpose of blending such tobacco for retail sale at a particular retail outlet where fifty percent or more of the total purchases for the preceding twelve months were purchases of tobacco products excluding cigarettes. *Tobacconist does not include businesses primarily engaged in selling roll-your-own tobacco to be used by consumers to make cigarettes.*

**Vending Machine:** means any mechanical, electric, or electronic self-service device which, upon insertion of money, tokens, or any other form of payment, automatically dispenses tobacco products. A vending machine permit shall be issued to the vending machine operator for each vending machine he operates and such permit shall be affixed to the front surface of the vending machine.

**Vending Machine Operator:** means any person who controls the use of one or more vending machines as to the supply of cigarettes or any tobacco products in the machine or the receipts from cigarettes vended through such machines. A vending machine operator permit shall be issued to a vending machine operator operating one or more vending machines.

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www.atc.la.gov

## General Definitions

Alternative Nicotine Product: means any non-combustible product containing nicotine that is intended for human consumption, whether chewed, absorbed, dissolved, or ingested by any other means.

Delivery Sale: means any sale of cigarettes to a consumer in the state where either (a) the purchase submits the order for such sale by means of a telephonic or other method of voice transmission, the mails or any other delivery service, or the Internet or other online service, or (b) the cigarettes are delivered by use of the mails or of a delivery service. A sale of cigarettes shall be a delivery sale regardless of whether the seller is located within or without this state. A sale of cigarettes not for personal consumption to a person who is a cigarette wholesale dealer or a cigarette retail dealer shall not be a delivery sale.

Place of Business: means the place where tobacco orders are received, or where the taxable tobacco articles are sold, or if sold by a retail dealer upon a railroad train or on or from any other vehicle, the vehicle on which or from which the taxable articles are sold by the retail dealer. It also includes the establishment where vending machine permits are located.

Stamp: means the impression, device, stamp, label or print manufactured or printed as prescribed by the secretary by the use of which tax levied hereunder is paid. By way of extension, and not limitation, the term “stamp” means any impression or character affixed to or which be stamped upon commodities by metered stamping machine or device by use of which the tax levied hereunder is paid.

Tobacco Product: means any cigar, cigarette, smokeless tobacco or smoking tobacco.

Vapor Product: means any non-combustible product containing nicotine or other substances that employs a heating element, power source, electronic circuit, or other electronic, chemical or mechanical means, regardless of shape size, that can be used to produce vapor from nicotine in a solution or other form. Vapor product includes any electronic cigarette, electronic cigar, electronic cigarillo, electronic pipe or similar product or device.

## Additional Information

- The business must be located within the State of Louisiana.
- Permits are valid for one year unless the business qualifies for a two year permit in accordance with LAC 55:VII:3109.
- Renewal dates are based on Parish code as listed in LAC 55:VII:3107.
- Retail dealers must purchase all tobacco products from Louisiana licensed wholesale dealers.
- Retail dealers must collect, report and remit sales tax on all sales of tobacco products.
- Delivery sales of cigarettes in and into Louisiana are **strictly prohibited**.
- All packs of cigarettes sold in Louisiana must bear a Louisiana tax stamp.
- Retail dealers must keep the permit on public display at the place of business.
- Retail permits are non-transferable and non-assignable.
- Retail dealers must comply with R.S. 14:91.6 relative to distribution of tobacco products.
- Retail dealers must comply with the terms of the “Prevention of Youth Access to Tobacco Law” under R.S. 14:91.8.
- Visit [www.atc.la.gov](http://www.atc.la.gov) for a current version of Louisiana’s tobacco laws and regulations.

### CHECKLIST OF ITEMS TO SUBMIT WITH APPLICATION

- ✓ If incorporated, your application must include a copy of corporate charter and articles of incorporation.
- ✓ If a partnership, your application must include a copy of the partnership agreement.
- ✓ If an LLC, your application must include a copy of your organizational registration from the Louisiana Secretary of State.
- ✓ Application must be signed by the sole proprietor or by a duly authorized agent, partner or officer.
- ✓ Application must contain your Louisiana Tax ID number (*10/digit number*).
- ✓ If a tobacconist, attach a list of the name and address of each of your intended suppliers.
- ✓ If any person with an ownership in the business has been convicted of a felony, you must provide a statement of the conviction and must include the charge, date of conviction, date of discharge and state of conviction.
- ✓ If vending machine operator, include a VM device form (included in application packet).

# LOUISIANA TOBACCO RETAIL DEALER APPLICATION

Permit #

CLASS

Select the applicable permit classification:

- RETAIL DEALER       TOBACCONIST       SPECIAL EVENT  
Dates: \_\_\_\_\_  
 VENDING MACHINE       VENDING MACHINE (OPERATOR)  
(Please complete additional form)

OWNER INFORMATION

Type of Ownership: (circle one):      Individual · Partnership · Corporation · Limited Liability Corporation (LLC)

Applicant Name (name of individual, partnership, LLC, etc.): \_\_\_\_\_

Trade Name: \_\_\_\_\_

Official Mailing Address (street/city/state/zip): \_\_\_\_\_

Contact Person: \_\_\_\_\_ Business Phone: (\_\_\_\_) \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_

Email address: \_\_\_\_\_ Business Website: \_\_\_\_\_

If the applicant is not an individual, list the name, title, and percentage of ownership for each partner, stockholder, officer or member.

Name: \_\_\_\_\_ Title: \_\_\_\_\_ % of ownership: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_ % of ownership: \_\_\_\_\_

Name: \_\_\_\_\_ Title: \_\_\_\_\_ % of ownership: \_\_\_\_\_

BUSINESS INFORMATION

Physical Address: \_\_\_\_\_ Parish: \_\_\_\_\_

Alcoholic Beverage Permit # for This Location (if applicable): \_\_\_\_\_ LA State Tax ID # \_\_\_\_\_

### Business Model (check all that apply)

- Grocery Store    Gas Station Only    Liquor Store    Boat    Train    Hotel/Motel    Vending Machine  
 Pharmacy    Tobacco Store    Bar/Lounge    Restaurant    Convenience Store    General Merchandise Store  
 Other (please explain): \_\_\_\_\_

### Applicant Intends to Sell (check all that apply):

- Cigarettes    Pipe Tobacco    Roll Your Own Tobacco    Cigars    Smokeless Tobacco    Electronic Cigs/Vapor

Have you or any owner, member, officer or director of the partnership, corporation, or LLC that you represent been convicted of a felony?       YES       NO

- If YES, please explain: \_\_\_\_\_

Have you or any owner, member, officer or director of the partnership, corporation, or LLC that you represent ever been convicted of the unlawful distribution of tobacco products to minors?       YES       NO

- If YES, please explain: \_\_\_\_\_

Have you or any owner, member, officer or director of the partnership, corporation, or LLC that you represent ever been convicted of failing to post the notice that it is unlawful to sell tobacco products to underage individuals as required under the terms and provisions of the "Prevention of Youth Access to Tobacco Law"?       YES       NO

- If YES, please explain: \_\_\_\_\_

Have you or any owner, member, officer or director of the partnership, corporation, or LLC that you represent ever been convicted of the unfair sales law as it applies to tobacco products as provided in LA R.S. 51:421?       YES       NO

- If YES, please explain: \_\_\_\_\_

I verify, that as of the date of this application, I have the right to occupy the property as stated on the application.

- YES       NO

- If NO, list date applicant will take possession of the property \_\_\_\_\_

**SWORN STATEMENT/CERTIFICATION OF AUTHENTICITY**

I CERTIFY that I am an owner, or duly authorized agent, partner or officer of applicant. I further certify, under the penalties of perjury, that I hereby apply for the tobacco retail permit indicated on this application, that I have fully examined and understand this application and all accompanying documents, and to the best of my knowledge and belief, it is true, correct and complete.

Signature: \_\_\_\_\_ Title: \_\_\_\_\_

Print your Name: \_\_\_\_\_

Sworn to and Subscribed to me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

In the Parish of \_\_\_\_\_, State of \_\_\_\_\_

Notary Public's Signature: \_\_\_\_\_ License Number: \_\_\_\_\_

Print Name of Notary Public: \_\_\_\_\_

**LOUISIANA OFFICE OF ALCOHOL AND TOBACCO CONTROL  
VENDING MACHINE IDENTIFICATION FORM**

*Please complete for EACH vending machine permit*

**MACHINE 1**

Owner Name: \_\_\_\_\_ Vending Machine Operator No.: \_\_\_\_\_  
Parish: \_\_\_\_\_  
Name of Business: \_\_\_\_\_ Where Placed: \_\_\_\_\_  
Business Address: \_\_\_\_\_ Machine Serial No.: \_\_\_\_\_

**MACHINE 2**

Owner Name: \_\_\_\_\_ Vending Machine Operator No.: \_\_\_\_\_  
Parish: \_\_\_\_\_  
Name of Business: \_\_\_\_\_ Where Placed: \_\_\_\_\_  
Business Address: \_\_\_\_\_ Machine Serial No.: \_\_\_\_\_

**MACHINE 3**

Owner Name: \_\_\_\_\_ Vending Machine Operator No.: \_\_\_\_\_  
Parish: \_\_\_\_\_  
Name of Business: \_\_\_\_\_ Where Placed: \_\_\_\_\_  
Business Address: \_\_\_\_\_ Machine Serial No.: \_\_\_\_\_

**MACHINE 4**

Owner Name: \_\_\_\_\_ Vending Machine Operator No.: \_\_\_\_\_  
Parish: \_\_\_\_\_  
Name of Business: \_\_\_\_\_ Where Placed: \_\_\_\_\_  
Business Address: \_\_\_\_\_ Machine Serial No.: \_\_\_\_\_

**MACHINE 5**

Owner Name: \_\_\_\_\_ Vending Machine Operator No.: \_\_\_\_\_  
Parish: \_\_\_\_\_  
Name of Business: \_\_\_\_\_ Where Placed: \_\_\_\_\_  
Business Address: \_\_\_\_\_ Machine Serial No.: \_\_\_\_\_

**MACHINE 6**

Owner Name: \_\_\_\_\_ Vending Machine Operator No.: \_\_\_\_\_  
Parish: \_\_\_\_\_  
Name of Business: \_\_\_\_\_ Where Placed: \_\_\_\_\_  
Business Address: \_\_\_\_\_ Machine Serial No.: \_\_\_\_\_

**MACHINE 7**

Owner Name: \_\_\_\_\_ Vending Machine Operator No.: \_\_\_\_\_  
Parish: \_\_\_\_\_  
Name of Business: \_\_\_\_\_ Where Placed: \_\_\_\_\_  
Business Address: \_\_\_\_\_ Machine Serial No.: \_\_\_\_\_



Office Use Only  
Permit Class and Number

Louisiana Office of Alcohol and Tobacco Control  
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# H&VMM Schedule A- Affidavit of Individual Suitability (Page 1 of 3)

Business Information

A Schedule A must be executed by each manager, each owner, partner, financial backer, officer, agent, director, stockholder, or member owning more than 5% of the stock or membership interest in the business.

Owner Name of Business (individual/partnership/LLC/corporation): \_\_\_\_\_

Trade Name of Business (dba name): \_\_\_\_\_

Business Phone Number: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Business Email Address: \_\_\_\_\_

Business Fax Number: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Individual Background Information

NAME (print): \_\_\_\_\_ [for manager, officer, member, etc]  
Last Name First Name Middle Initial

Maiden Name/Aliases/Nickname/Former Legal Names (if any): \_\_\_\_\_

Occupation: \_\_\_\_\_ Employer: \_\_\_\_\_

Date of Birth: \_\_/\_\_/\_\_\_\_ Present Age: \_\_\_\_\_ Place of Birth: \_\_\_\_\_

Home/Office Phone Number: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Cell Phone Number: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Email Address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
Street  
City/State/Zip

Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ Race: \_\_\_\_\_ Gender: \_\_\_\_\_

Driver's License Number: \_\_\_\_\_ State of Issuance: \_\_\_\_\_

Affiliation with business: \_\_\_\_\_ (job title/position) Percentage of ownership: \_\_\_\_\_



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**HVUM Schedule A- Affidavit Continued (Page 2 of 3)**

Qualifications

**\*\*If you answer "YES" to any of the following questions about your criminal history, you must complete a Schedule F.\*\***

1. Have you ever been convicted of a felony? YES  NO 
  - This includes an offense adjudicated under Article 893 or 894, dismissals, pardons, expungements, guilty pleas, and pleas of nolo contendere "no contest."
2. Have you ever been convicted of or found to have violated the unlawful distribution of tobacco products, alternative nicotine products, or vapor products to persons under the age of 18 under R.S. 14:91:6? YES  NO
3. Have you ever been convicted of or found to have violated the provisions of the "Prevention of Youth Access to Tobacco Law" by failing to post the notice that it is unlawful to sell tobacco products, alternative nicotine products, or vapor products to underage individuals under R.S. 14:91.8? YES  NO
4. Have you ever been convicted of or found to have violated the unfair sales law as it applies to tobacco products as provided in R.S. 51:421 et seq? YES  NO
5. Have you ever been convicted of or found to have violated any tobacco, alternative nicotine product or vapor product regulatory statute, or rule, including a tobacco tax statute or rule? YES  NO



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***H&VMSchedule A - Affidavit Continued (Page 3 of 3)***

***Affidavit***

I swear that I have read each of the above questions and the answers that I have given are true and correct to the best of my knowledge; and that I meet the qualifications and conditions set out in R.S. 26:901 et seq.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Title

\_\_\_\_\_  
Print/Type Applicant's Name

**For NOTARY Use Only**

Sworn to and subscribed to me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_,

In the parish/county of \_\_\_\_\_, State of \_\_\_\_\_.

\_\_\_\_\_  
Notary Public's Signature

\_\_\_\_\_  
Print Name of Notary Public



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## *Schedule F*

This form must be completed by any applicant who has been convicted of a felony and seeks lawful issuance of an alcoholic beverage permit under the provisions of R.S. 26:80(f) and/or 26:280(f). Applicant attests that the felony was not a crime of violence as defined in LA R.S. 14:2(13), and that 10 years or more have passed between the date of this application and the successful completion of any sentence, deferred adjudication, or period of probation, parole, and the final discharge of the defendant. Applicant is required to submit official documentation of pardon, restoration of rights, or official certification that 10 years or more has passed since successful completion of any sentence, deferred adjudication, or period of probation or parole and the final discharge of the defendant at the time of application.

### **CRIMES OF VIOLENCE**

**A CRIME OF VIOLENCE IS DEFINED IN LA R.S. 14:2(13) AS ANY OF THE BELOW-LISTED CRIMES.**

**IF YOU HAVE BEEN CONVICTED OF ANY OF THE BELOW LISTED CRIMES, YOU WILL NOT QUALIFY FOR AN ALCOHOLIC BEVERAGE PERMIT.**

- |  |  |
|--|--|
| 1. SOLICITATION FOR MURDER                 | 25. EXTORTION  |
| 2. FIRST DEGREE MURDER                     | 26. ASSAULT BY DRIVE-BY SHOOTING                           |
| 3. SECOND DEGREE MURDER                    | 27. AGGRAVATED CRIME AGAINST NATURE                        |
| 4. MANSLAUGHTER                            | 28. CARJACKING   |
| 5. AGGRAVATED BATTERY                      | 29. ILLEGAL USE OF WEAPONS OR DANGEROUS INSTRUMENTALITIES  |
| 6. SECOND DEGREE BATTERY                   | 30. TERRORISM  |
| 7. AGGRAVATED ASSAULT                      | 31. AGGRAVATED SECOND DEGREE BATTERY                       |
| 8. MINGLING HARMFUL SUBSTANCES             | 32. AGGRAVATED ASSAULT UPON A PEACE OFFICER WITH A FIREARM |
| 9. AGGRAVATED OR FIRST DEGREE RAPE         | 33. AGGRAVATED ASSAULT WITH A FIREARM                      |
| 10. FORCIBLE OR SECOND DEGREE RAPE         | 34. ARMED ROBBERY; USE OF FIREARM; ADDITIONAL PENALTY      |
| 11. SIMPLE OR THIRD DEGREE RAPE            | 35. SECOND DEGREE ROBBERY                                  |
| 12. SEXUAL BATTERY                         | 36. DISARMING OF A PEACE OFFICER                           |
| 13. SECOND DEGREE SEXUAL BATTERY           | 37. STALKING   |
| 14. INTENTIONAL EXPOSURE TO AIDS VIRUS     | 38. SECOND DEGREE CRUELTY TO JUVENILES                     |
| 15. AGGRAVATED KIDNAPPING                  | 39. AGGRAVATED FLIGHT FROM AN OFFICER                      |
| 16. SECOND DEGREE KIDNAPPING               | 40. BATTERY OF A POLICE OFFICER                            |
| 17. SIMPLE KIDNAPPING                      | 41. TRAFFICKING OF CHILDREN FOR SEXUAL PURPOSES            |
| 18. AGGRAVATED ARSON                       | 42. HUMAN TRAFFICKING                                      |
| 19. AGGRAVATED CRIMINAL DAMAGE TO PROPERTY | 43. HOME INVASION  |
| 20. AGGRAVATED BURGLARY                    | 44. DOMESTIC ABUSE AGGRAVATED ASSAULT                      |
| 21. ARMED ROBBERY                          | 45. VEHICULAR HOMICIDE, WHEN OPERATOR'S BAC EXCEEDS .20    |
| 22. FIRST DEGREE ROBBERY                   |  |
| 23. SIMPLE ROBBERY                         |  |
| 24. PURSE SNATCHING                        |  |



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### Schedule F Cobi X

Business

Date of Application: \_\_\_/\_\_\_/\_\_\_\_\_ Trade Name (d/b/a name): \_\_\_\_\_

Type of Ownership (circle one): Individual \* Partnership \* Corporation \* Limited Liability Corporation (LLC)

Owner Name (name of individual, partnership, etc.): \_\_\_\_\_

Individual Background Information

NAME (print): \_\_\_\_\_ Aliases (If any): \_\_\_\_\_  
Last Name First Name Middle Initial

Date of Birth: \_\_\_/\_\_\_/\_\_\_\_\_ Present Age: \_\_\_\_\_ Sex: \_\_\_\_\_ Race: \_\_\_\_\_

Identification Number (driver's license number, state ID card, etc.): \_\_\_\_\_

Social Security Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Home Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Cell Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Affiliation with business (job title/position): \_\_\_\_\_

Charge/Conviction

#### YOU MUST ATTACH A COURT RECORD OF THE DISPOSITION OF EACH CHARGE/CONVICTION

Charge and statute number: \_\_\_\_\_

Date of Conviction: \_\_\_\_\_ Date of Final Discharge: \_\_\_\_\_  
Jurisdiction (Name of Court/Agency): \_\_\_\_\_

Charge and statute number: \_\_\_\_\_

Date of Conviction: \_\_\_\_\_ Date of Final Discharge: \_\_\_\_\_  
Jurisdiction (Name of Court/Agency): \_\_\_\_\_

Affidavit

#### AFFIDAVIT

I affirm that the above information is true and correct to the best of my knowledge, and that a copy of official documentation regarding the disposition of each charge/violation is attached.

\_\_\_\_\_  
Signature Print/Type Name Title

**For NOTARY Use Only**

Sworn to and subscribed to me this \_\_\_ day of \_\_\_\_\_, 20\_\_\_\_,

In the parish/county of \_\_\_\_\_, State of \_\_\_\_\_.

\_\_\_\_\_  
Notary Public's Signature Print Name of Notary Public

## A Note from the Louisiana Office of Alcohol & Tobacco Control

As the agency tasked with regulating alcoholic beverage and tobacco commodities, one of our main goals here at ATC is to promote awareness and understanding throughout the industry of the Alcoholic Beverage and Tobacco Laws and Regulations. As such, we feel that it may be helpful to provide you with a few commonly un-known or misunderstood provisions of law. Please read the following.

- Licensed Louisiana retail dealers of alcohol and tobacco products can only purchase their inventory from licensed Louisiana wholesale dealers.
- 6% price mark-up provisions apply to alcohol and tobacco products.
- Permits are issued per location address and only one alcoholic beverage permit can be issued to an address (i.e. you cannot have two classes of permits at one address).
- **Public habitable area** means publicly accessible space, within a structure, which is permanent in nature, is in compliance with applicable building codes, is fully enclosed and climate controlled.
- Employees selling or serving alcoholic beverage and tobacco products must obtain a Responsible Vendor Certification within 45 days of employment.
- Retail dealers are required to maintain alcoholic beverage and tobacco invoices as well as employee records on the licensed premise at all times.
- Managers must be registered and certified by ATC. It is important to supply a Schedule A on all appointed managers.
- ATC is authorized to accept documentation and provide information to anyone registered with a business. As such, it is imperative, for the safety your business information, to maintain current ownership and management records with ATC.
- Smoking is not allowed on any areas of a Class B, C (package stores), or AR premise (restaurant).
- Placing signs provided by wholesalers/suppliers outside your business is prohibited (this also includes utility items such as table umbrellas).
- The sale of single cigarettes is prohibited.

A complete copy of the Alcoholic Beverage and Tobacco laws and regulations can be downloaded from the ATC website at [www.atc.la.gov](http://www.atc.la.gov). We are always happy to assist you with any questions or concerns at (225)925-4041. Additionally, we encourage you to help us promote responsible business practices by reporting violations of the alcoholic beverage and tobacco laws to our complaint line at (225)925-4070.