

**State of Louisiana
Office of Alcohol and Tobacco Control**

COMMISSIONER CHAD M. BROWN

**Vending Machine Operator & Vending Machine
Permit Information**

Statutory Authority: La. R.S. 26:901 *et seq.*

Who must use this packet: Any person who controls the use of one or more tobacco, alternative nicotine, or vapor product vending machines in Louisiana. Licensed wholesale dealers operating their own machines are **exempt** from the Operator Permit but must still obtain a Vending Machine Permit for each individual machine.

PACKET CONTENTS

PART A	Vending Machine Operator Permit Application — applicant identity, principal place of business, ownership/officers, products & operations, entity-level compliance questionnaire, and sworn certification.
PART B	Vending Machine Registration Addendum — one completed entry per machine. A separate \$5.00 Vending Machine Permit is issued per machine and must be affixed to its front surface. [§ 902(4)]

PERMIT FEES (La. R.S. 26:906(C))

Permit	Fee	Renewal
Vending Machine Operator Permit	\$75.00 / year	Expires June 30 annually
Vending Machine Permit (per machine)	\$5.00 / machine / year	Expires June 30 annually

Make checks payable to the Louisiana Office of Alcohol and Tobacco Control.

KEY DEFINITIONS (La. R.S. 26:901 et seq.)

Vending Machine Operator	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. [§ 901(34)] Wholesale dealers operating their own machines are exempt from this permit.
Vending Machine	Any mechanical, electric, or electronic self-service device which, upon insertion of money, tokens, or any other form of payment, automatically dispenses tobacco, alternative-nicotine, or vapor products.
Place of Business	The place where tobacco orders are received or where taxable tobacco articles are sold; includes the establishment where vending machines are located. [§ 901(13)]
Tobacco Product	Any cigar, cigarette, smokeless tobacco, or smoking tobacco. [§ 901]
Vapor Product	Any non-combustible product employing a heating element, electronic circuit, or chemical or mechanical means to produce vapor from nicotine or other substances; includes e-cigarettes, e-cigars, e-cigarillos, and similar devices. [§ 901(32)]
Alternative Nicotine Product	Any non-combustible product containing nicotine intended for human consumption — chewed, absorbed, dissolved, or otherwise ingested. [§ 901(1)]

PLACEMENT & COMPLIANCE REQUIREMENTS (La. R.S. 26:910-913)

Age Restriction	No vending machine shall be placed in any location accessible to persons under the age of 21. The establishment shall deny and restrict entry to any persons under the age of 21 and ensure the placement of the vending machine is within the unobstructed line of sight of a retail employee responsible for preventing underage purchases. [§ 910]
Required Signage	Each retail establishment must publicly display a sign with not less than 22-point type stating: "LOUISIANA LAW PROHIBITS THE SALE OF TOBACCO PRODUCTS, ALTERNATIVE NICOTINE PRODUCTS, OR VAPOR PRODUCTS TO PERSONS UNDER AGE 21" or words of similar meaning, plus the LA Tobacco Quitline (1-800-QUIT-NOW) and website (www.quitwithusla.org). [§ 911(B)(2); R.S. 14:91.8(D)]
Permit Affixation	The Vending Machine Permit must be affixed to the upper front surface of each machine at the retail location designated on the permit. Permits are non-transferable and non-assignable. Vending machine cannot be placed in any location unless explicitly approved with a valid and current permit. [§ 902(4)]
Authorized Sources	All products must be purchased from Louisiana-licensed wholesale dealers. All cigarette packs must bear a Louisiana tax stamp. All applicable excise and sales taxes must be collected, reported, and remitted. [§ 911; R.S. 47:841 et seq.]
VAPE Directory	Vapor and alternative-nicotine products vended must appear on the Louisiana ATC VAPE Directory. Products not listed may not be sold or vended in Louisiana. [§ 911(D)]
Recordkeeping	Operators must maintain invoices, employee records, and machine-placement records on the licensed premises at all times. Managers must be registered and certified by ATC.
Responsible Vendor	Employees who sell or service machines must obtain Responsible Vendor Certification within 45 days of employment.

SUBMISSION CHECKLIST – REQUIREMENT

- Completed Part A – Vending Machine Operator (VMO) Permit Application, signed and notarized.
- Completed Part B – Vending Machine Permit Addendum (one entry per machine; duplicate as needed).
- Copy of corporate charter and articles of incorporation (if incorporated).
- Copy of partnership agreement (if a partnership).
- Copy of organizational registration from the Louisiana Secretary of State
- Completed Schedule A/F by each individual, owner, member, director, manager etc.
- Colored copy of driver's license for each individual completing Schedule A/F.
- If applicable, submit disposition documents (court minutes, court order, or DA/Probation letter) for any disclosed felony.
- Photograph and specification sheet for each vending machine.
- Executed Affidavit by Retail Dealer Establishment Owner or Authorized Representative & Vending Machine Operator
- Payment of all applicable fees – check payable to the Louisiana Office of Alcohol and Tobacco Control.

PART A

VENDING MACHINE OPERATOR PERMIT APPLICATION



Commissioner Chad Brown

A1. APPLICATION TYPE

Date: New Application Amendment

A2. APPLICANT IDENTITY

TYPE OF OWNERSHIP: Individual Partnership Corporation LLC Other: _____

LEGAL NAME OF APPLICANT (hereinafter "APPLICANT")	TRADE NAME / DBA
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CORRESPONDENCE / MAILING ADDRESS

CITY	STATE	ZIP
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FEDERAL EIN	LA STATE TAX ID (10-DIGIT)
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PRIMARY CONTACT – NAME & TITLE	BUSINESS PHONE	CELL PHONE
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BUSINESS EMAIL ADDRESS	BUSINESS WEBSITE
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A3. PRINCIPAL PLACE OF BUSINESS

Vending Machine Operator's primary office and warehouse – not individual machine locations. Vending Machine locations are listed on PART B.

BUSINESS PHYSICAL ADDRESS

CITY	PARISH	STATE	ZIP
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Is Applicant taking over an existing business? If YES, submit Sale Documents including inventory or asset purchase. Yes No

A4. OWNERSHIP, OFFICERS & MANAGERS

List every owner, officer, director, partner, or member with more than 5% interest and every person who will conduct or manage the business. Each individual must complete a Schedule A/F.

Full Legal Name	Title / Role	% Ownership	Manager?
			<input type="radio"/> Y <input type="radio"/> N
			<input type="radio"/> Y <input type="radio"/> N
			<input type="radio"/> Y <input type="radio"/> N
			<input type="radio"/> Y <input type="radio"/> N

A5. PRODUCTS & OPERATIONS

PRODUCTS TO BE VENDED (check all that apply)

- Cigarettes Cigars Smokeless Tobacco RYO Tobacco Alternative Nicotine Products Vapor Products

LIST ALL WHOLESALE SUPPLIER(S) – NAME & PERMIT NUMBER(S) – ADD ADDITIONAL PAGES IF NECESSARY

A6. COMPLIANCE & ELIGIBILITY (LA. R.S. 26:912 ET SEQ.)

Answer on behalf of the applicant entity AND all owners, officers, directors, partners, and members. Provide explanation on a separate sheet for any 'Yes' answer.

Has APPLICANT ever been convicted of, or pled guilty or nolo contendere to, a felony charge? (Including dispositions under La. C.Cr.P. arts. 893 or 894).	<input type="radio"/> Yes	<input type="radio"/> No
Has APPLICANT ever been convicted of, or found to have violated, the unlawful distribution of tobacco, alternative-nicotine, or vapor products to persons under age 21 under R.S. 14:91.6?	<input type="radio"/> Yes	<input type="radio"/> No
Has APPLICANT ever violated the "Prevention of Youth Access to Tobacco Law" under R.S. 14:91.8 – including any required-signage violation?	<input type="radio"/> Yes	<input type="radio"/> No
Has APPLICANT been convicted of or found in violation of any tobacco-tax provision under R.S. 47:841 <i>et seq.</i> ?	<input type="radio"/> Yes	<input type="radio"/> No
Has any tobacco, alcohol, or hemp permit issued to the APPLICANT or any listed person ever been denied, suspended, revoked, or ordered to surrender any permit or license(s) in any jurisdiction? If yes, provide an explanation on a separate sheet.	<input type="radio"/> Yes	<input type="radio"/> No
Does the APPLICANT or any listed person currently owe any taxes, fines, or fees due to the State of Louisiana or any of its political subdivisions, including ATC?	<input type="radio"/> Yes	<input type="radio"/> No
Does APPLICANT attest any vending machine operated under this permit shall be placed in location(s) that comply with R.S. 26:910?	<input type="radio"/> Yes	<input type="radio"/> No
Does APPLICANT attest and understand that in addition to holding a valid vending machine operator permit, a separate Vending Machine Permit is required for each vending machine?	<input type="radio"/> Yes	<input type="radio"/> No
Does the APPLICANT understand that all purchases of tobacco products for resale purpose, including vapor and alternative nicotine products are required to be purchase exclusively from Louisiana-licensed wholesale dealers?	<input type="radio"/> Yes	<input type="radio"/> No

A7. SWORN CERTIFICATION

I CERTIFY that I am the owner, or duly authorized agent, partner, or officer of the applicant. I further certify, under penalty of perjury, that I have fully examined this application and all accompanying documents, that the information provided is true, correct, and complete to the best of my knowledge and belief, and that the applicant and each person listed possess the qualifications and conditions set forth by law. I consent to background investigation by the Office of Alcohol and Tobacco Control and to the sharing of this information with the Louisiana State Police and other regulatory authorities as authorized by law.

Print Operator's Name

Title

Signature of Operator

Date

A8. NOTARY ACKNOWLEDGMENT

Sworn to and subscribed before me this _____ day of _____, 20_____, in the parish of _____, State of _____.

Notary Public Signature

Print Name of Notary Public

OFFICE USE ONLY

Date Received:

Processed By:

Date Completed

Completed By: