

TENNESSEE DEPARTMENT OF REVENUE Beer Wholesaler Territorial Designation

A completed, signed, and notarized form must be submitted to the Department of Revenue at least 10 days prior to introducing a new brand into the described territory. Please mail to: Tennessee Department of Revenue, 500 Deaderick Street, Nashville, TN 37242.

1. Manufacturer/Importer Name			
AddressStreet			
Street	City	State	Zip Code
2. Manufacturer/Importer Agent Nar	ne and Title		
AddressStreet			
Street	City	State	Zip Code
3. Brands of Beer Offered for Distrib wholesaler named in Line 4. You r			ds distributed by the
4. Wholesaler Name			
AddressStreet			
5. Wholesaler Principal Name		State	Zip Code
county or city that is assigned.)			
Under the penalties of perjury, I decle it is true, correct, and complete.	are that I have examined this	form, and to the best of m	ly knowledge and belief
NameSignature and Title of M	anufacturer, Importer, or Agent	Date	
Notary Public ————————————————————————————————————			
NameSignature and	d Title of Wholesaler	Date	
Notary Public			
	Department of Revenue	Use Only	
Approved:	Effective Date:		