



**APPLICATION FOR REGISTERING NEW BRANDS OF DISTILLED SPIRITS AND WINES**

|   |       |  |   |  |          |
|---|-------|--|---|--|----------|
| TAX PERIOD<br><b>6/1/09 - 5/31/10</b>                                       |       | 1. LEGAL NAME (REGISTRANT)<br>_____                    |   | 2. REGISTRANT'S FEDERAL EIN NO.<br>_____                             |          |
| 3. D/B/A NAME, IF ANY<br>_____  |       | 4. BUSINESS TELEPHONE #<br>(    ) _____<br>FAX # _____ |   | 5. CONTACT PERSON<br>NAME: _____<br>TELEPHONE # _____<br>FAX # _____ |          |
| BUSINESS LOCATION ADDRESS<br>_____  |       |  | BUSINESS MAILING ADDRESS<br>_____           |  |          |
| STREET, HIGHWAY (DO NOT USE P.O. BOX NUMBER OR RURAL ROUTE NUMBER)<br>_____ |       |  | P.O. BOX, STREET, ROUTE OR HIGHWAY<br>_____ |  |          |
| CITY  | STATE | ZIP CODE   | CITY  | STATE  | ZIP CODE |

In accordance with the provisions of T.C.A. Section 57-3-301, the undersigned does hereby request registration of the brand(s) of alcoholic beverages listed on the attached schedule for distribution in the State of Tennessee. New brands are defined as brands which were not previously distributed in this state.

- 1. Number of brands of distilled spirits. (Please see note.) \_\_\_\_\_ x \$ \_\_\_\_\_ = \$ \_\_\_\_\_
- 2. Number of new brands of wine. (Please see note.) \_\_\_\_\_ No Tax
- 3. Total Amount Remitted ..... T-11 \$ \_\_\_\_\_

NOTE: The initial brand registration tax of \$250.00 on any brand(s) of distilled spirits subsequent to the beginning of the privilege tax year is to be prorated on a monthly basis from date of registration to the end of such privilege tax year. Registration tax for distilled spirits for the subsequent first full privilege tax year shall be based on the average monthly number of cases sold at wholesale during the initial partial privilege tax year times twelve (12). There shall be no tax due on the initial registration of any brand(s) of wine.

This is to certify that information contained herein and on the attached schedule is true and correct to the best of my knowledge.

\_\_\_\_\_  
 Print or Type Name of Officer

\_\_\_\_\_  
 Signature of Officer of Company

\_\_\_\_\_  
 Name of Manufacturer

\_\_\_\_\_  
 Title

\_\_\_\_\_  
 Date

**INSTRUCTIONS**

- Application should be printed legibly or typed and each field must be completed.
- Application must be accompanied by the following documents:  
 Copy of the non-resident Tennessee license for the registrant (issued by TN Alcoholic Beverage Commission)  
 Copy of the federal basic permit.  
 Copy of the brand label (if brand is distributed under more than one label, each respective label must also be furnished).  
 Copy of the federal C.O.L.A. for each brand.  
 Original Tennessee wholesaler contract with the exact brand name listed.
- If the registrant is not the producer, bottler or manufacturer, the application must be accompanied by a prime American source letter for imported products or an appointment letter for domestic products. If the federal basic permit has the listed products as an additional trade name authorized by such permit, then the Department will accept this documentation.
- Application must be signed and dated by an officer of the company.
- Payment equal to the amount of Line 3 must be submitted with this application.
- Mail application to: Tennessee Department of Revenue, 500 Deaderick Street, Nashville, TN 37242

