



Matanuska-Susitna Borough Cigarette and Tobacco Products 2017 Retail License Application

Send Application with payment to:
Matanuska-Susitna Borough
Revenue & Budget Division
Excise Tax
350 E Dahlia Avenue
Palmer Alaska 99645

LICENSE YEAR JANUARY 1 – DECEMBER 31, 2017

NAME UNDER WHICH BUSINESS WILL BE CONDUCTED:		LICENSEE NO:	
NAME AND ADDRESS OF APPLICANT:	FEDERAL EIN OR SSAN*		
	CONTACT NAME:	TELEPHONE NUMBER:	
PHYSICAL LOCATION(S) WHERE THIS LICENSE IS APPLICABLE:	FAX NUMBER:	EMAIL ADDRESS:	
	TYPE OF BUSINESS ACTIVITY: (Check each box that applies per Ord's 05-068 or 15-098)		
	<input type="checkbox"/> A. Buyer <input type="checkbox"/> B. Retailer <input type="checkbox"/> C. Distributor <input type="checkbox"/> D. Manufacturer <input type="checkbox"/> E. Vending Machine Operator <input type="checkbox"/> F. Wholesaler-Distributor <input type="checkbox"/> G. E-Cig or Vape Sales or Manufacturer- please circle one		

*If your business has not been issued a federal employer identification number (EIN), you are requested to provide your social security number (SSAN). The information is used by the Matanuska-Susitna Borough for identification purposes only

Explain in general the nature of your business:
Indicate the source of your cigarette and tobacco product purchases:

LICENSE FEE:

A **\$100.00** license fee must accompany this application. Make your check payable to:

MATANUSKA-SUSITNA BOROUGH

NOTE:

A copy of your State of Alaska Cigarette and Tobacco Products License issued under AS 43.50.010-.390 and a copy of your Matanuska-Susitna Borough Business License must accompany this application.

Name (Please Print):	Signature:	Title (Please Print):	Date: