

DEPARTMENT OF THE TREASURY

ALCOHOL AND TOBACCO TAX AND TRADE BUREAU (TTB)

**APPLICATION FOR BASIC PERMIT UNDER THE FEDERAL ALCOHOL ADMINISTRATION ACT**

1. FULL NAME AND PREMISES ADDRESS	3. EMPLOYER IDENTIFICATION NUMBER (EIN) <i>(Social Security number is not acceptable)</i>
TELEPHONE NUMBER (      ) State in which organized for Corporations and Limited Liability Companies (LLC):	4. OPERATING NAME (DBA), if any
2. MAILING ADDRESS <i>(If different from premises address)</i>	5. LABELING TRADE NAME(S), if any

6. BUSINESS(ES) TO BE CONDUCTED AT PREMISES ADDRESS *(Check applicable boxes)*

a.  DISTILLED SPIRITS PLANT (*BEVERAGE*)  
 DISTILLING  
 WAREHOUSING AND BOTTLING DISTILLED SPIRITS  
 PROCESSING (*RECTIFYING*) DISTILLED SPIRITS AND WINE

c.  IMPORTING INTO THE UNITED STATES  
 DISTILLED SPIRITS  
 WINE  
 MALT BEVERAGES

b.  BONDED WINE PREMISES  
 PRODUCING AND BLENDING WINE  
 BLENDING WINE

d.  PURCHASING FOR RESALE AT WHOLESALE  
 DISTILLED SPIRITS  
 WINE  
 MALT BEVERAGES

or while so engaged, sell, offer, or deliver for sale, contract to sell, or ship in interstate or foreign commerce the alcoholic beverages so distilled, produced, rectified, blended or bottled, warehoused and bottled, imported, or purchased for resale at wholesale.

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7. REASON FOR THE APPLICATION (use date format MM/DD/YYYY)

a.  NEW BUSINESS  
Anticipated start date \_\_\_\_\_

c.  CHANGE IN OWNERSHIP

Date of Change \_\_\_\_\_

Name, address, and permit number(s) of predecessor

b. CHANGE IN CONTROL *(Actual or legal)*  
 Submit Basic Permit(s) with this application.  
Date of Change \_\_\_\_\_

8. OWNER INFORMATION (List sole owner, all general partners, LLC members/managers, corporate officers and directors, and shareholders with more than 10% voting stock. Each listed person must also furnish the information in Item 9.)

IF APPLICANT IS ACTUALLY OR LEGALLY CONTROLLED BY PERSONS OR BUSINESSES NOT IDENTIFIED ABOVE, PROVIDE ON A SEPARATE SHEET INFORMATION (as specified for Item 9) FOR EACH PERSON OR BUSINESS AND STATE THE EXTENT AND MANNER OF THE CONTROL. BUSINESSES SHOULD INCLUDE THEIR EIN.

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9. COMPLETE FOR EACH PERSON LISTED IN ITEM 8.

e.  MALE  FEMALE

f. OTHER NAMES USED (*Maiden name, nicknames, etc.*)

MALE  FEMALE