DEPARTMENT OF REVENUE

CT102

License Application to Make Retail Sales of Cigarette and Other Tobacco Products

To be completed by applicant when applying for a license with a city or county.

FOR MUNICIPAL USE ONLY

License Authority
City of Ramsey
License Number
Period Covered
Date of Issuance

Print or Type

Applicant's Minnesota Tax ID Number

The Minnesota Tax ID must be issued in the same legal name of the licensee below.

Cigarettes/tobacco products will be sold *(a separate license is required for each location or vending machine)*:

☐ Over Counter ☐ Through Vending Machine ☐ Both

Licensee's Legal Name				Federal Employer ID Number (FEIN)
Business Trade Name (doing business as)				Daytime Phone
Complete Address of Business Location *(permit location)*		County		Other Phone Number
City		State	ZIP Code	Fax Number
Mailing Address *(if different than business address)*	City	State	ZIP Code	Email Address

Business Information

Type of legal organization *(check one)*:

☐ Sole proprietor
☐ Partnership
☐ Other *(describe)* _____
☐ Minnesota corporation: Enter date of incorporation _____
☐ Out-of-state corporation: State of incorporation _____
Are you registered to do business in Minnesota? ☐ Yes ☐ No

Corporate officers or partners *(attach a list if necessary)*

Name	Title		
Address	City	State	ZIP Code
Name	Title		
Address	City	State	ZIP Code

Statement of Understanding

As a licensed tobacco products or cigarette retailer, I understand that:

1. I can purchase cigarettes and tobacco from a Minnesota distributor or subjobber who holds a license with the Minnesota Department of Revenue. The Cigarette and Tobacco Distributor List is on our website. Go to www.revenue.state.mn.us and type Distributor List in the Search box.
2. I must obtain a tobacco products distributor license if I purchase untaxed tobacco products from an out-of-state company.
3. I may not sell cigarettes affixed with Minnesota Native American stamps unless my retail business is located on a reservation that has a tax agreement with the State of Minnesota.
4. I may not purchase from or exchange cigarettes or tobacco products with another retailer.
5. I must keep complete and legible cigarette and tobacco products invoices on the licensed premises, or make invoices available within one hour of request, for at least one year after the date of the purchase.
6. I know that the Minnesota Department of Revenue and/or law enforcement may conduct cigarette and tobacco inspections of the premises, including inspections of inventory, invoices and licenses, and I understand that a refusal to allow an inspection is grounds for revocation of my license.
7. I know that failure to comply with all requirements can result in criminal penalties, including the loss of cigarettes and tobacco products.

Sign Here

Licensee Signature	Title	Print Name	Date	Daytime Phone
Licensing Agent's Signature	Title	Print Name	Date	Daytime Phone

License applicant: Submit this form to the licensing authority along with the license application.
Licensing authority: Mail, email or fax to:
Minnesota Revenue, Mail Station 3331, St. Paul, MN 55146-3331.
Fax: 651-556-5236. Email: cigarette.tobacco@state.mn.us