



# State of Louisiana

## Office of Alcohol and Tobacco Control

### Alcoholic Beverage Wholesale Dealer Information Sheet

Applicants seeking to become a wholesale dealer of any alcoholic beverages (other than malt beverages) must provide the following:

1. Proof of the appropriate federal permit from United States Alcohol and Tobacco Tax and Trade Bureau. Please contact TTB at (225)231-6620. Website is [www.ttb.gov](http://www.ttb.gov).
2. Proof of the appropriate surety bond from the Louisiana Department of Revenue. Please contact the Department of Revenue, Excise Division @ (225)219-7656.
3. Completed Louisiana Liquor Wholesale Dealer Application [www.atc.la.gov](http://www.atc.la.gov):
  - a. Permit fees (\$2500.00)
  - b. Schedule A forms to be provided on all officers, directors, owners, members, stockholder's owning more than 5% interest, and managers
  - c. Schedule F form if applicable (i.e. for persons who have been convicted of a felony).
  - d. Fingerprints to be submitted on all officers, directors, owners, members and stockholder's owning more than 5% interest
    - a. Each set of fingerprints must include two fingerprint cards, an authorization form, a disclosure form and \$38.00 in the form of a cashier's check, money order, or business check made out to Louisiana State Police.
  - e. Completed Schedule B form
  - f. Corporate documentation ( Secretary of State Certificate and Articles of Incorporation or Articles of Organization and proof of registration and good standing with the Louisiana Secretary of State)
  - g. Proof of a valid lease or ownership of delivery equipment that is dedicated to the primary use for the distribution and delivery of alcoholic beverages.
  - h. Signed letter documenting the distributor's immediate trade area, along with parishes and the number of retailers.
  - i. Proof of a brand representation agreement with a licensed manufacture/supplier
  - j. Proof of a valid lease or ownership of the property to be permitted or proof that space in a public warehouse is dedicated to applicant's use.
  - k. Diagram of the premises to be permitted

- I. Signed Statutory Acknowledgement affidavit form
- m. Proof of a valid local alcoholic beverage permit or documentation evidencing that the applicant has applied for the proper local alcoholic beverage permit.

***Note: Applicants for an alcoholic beverage wholesale dealer permit shall not hold an interest in any alcoholic beverage manufacturer/supplier or retail permit.***

***A current version of the Louisiana Alcoholic Beverage Law and Regulations is available on our website at [www.atc.la.gov](http://www.atc.la.gov) under the Legal section of the Resources tab.***

## **Qualifications for Wholesale Malt Beverage Permit Applicants**

### **Louisiana Revised Statutes 26:2, Paragraph (18)**

(18) " Wholesale dealer" means those persons who sell alcoholic beverages of high alcoholic content to licensed wholesale dealers or licensed retail dealers exclusively, within the state or to any person for delivery beyond the borders of the state to a licensed dealer in that state and who conduct a bona fide wholesale business and maintain a warehouse or warehouses for the storage and warehousing of alcoholic beverages of high alcoholic content in the area where domiciled and licensed by the state, and conduct and maintain systematic and regular solicitations, distribution, deliveries, and sales of said beverages to licensed retail dealers located within the boundary of each parish, municipality, or geographic area, as contractually defined between the wholesaler and his supplier, in which the wholesaler makes any sale or delivery.

### **Louisiana Revised Statutes 26:359, Subsection A**

A. Except as provided in Subsection B of this Section and R.S. 26:271.1 and 326, no alcoholic beverages as defined in R.S. 26:241(1) produced or manufactured inside or outside of this state shall be sold or offered for sale in Louisiana, or shipped or transported into or within the state, except to the holder of a wholesaler's permit. Delivery of alcoholic beverages produced or manufactured inside or outside of this state shall be made at the place of business of the wholesaler shown on the wholesaler's permit, and must be received and warehoused by the wholesaler at that place of business, where such alcoholic beverages shall come to rest before delivery is made to any retailer.

### **Louisiana Revised Statutes 26:741, Paragraphs A through D**

A. All sales of beer and other malt beverages containing more than one-half of one per cent alcohol by volume made by wholesalers to retailers shall be for cash only.

B. The term "cash" as used in this Section means any consideration consisting of currency, or coin, or check, or certified check, or bank money order, in an amount equalling but not exceeding the purchase price of the beer or other malt beverage delivered. The failure to pay cash upon delivery, or any maneuver, device, or shift of any kind, whereby credit is extended, shall constitute a violation of this Section and subject the license of any violator of this Section to suspension or revocation by the commissioner.

C. The term "check" as used in this Section is an order in writing by a retail beer permittee drawn on, and in accordance with the rules of any bank licensed under the laws of this State, or of the United States of America, ordering said bank to pay a certain sum of money to the beer wholesale permittee making the sale, which check is honored by the bank upon presentation.

D. The commissioner shall promulgate rules and regulations defining terms, specifying conditions by which checks and other cash, as defined in Subsections A and B hereof, may be accepted in payment of beer and other malt beverages and establishing procedures and making requirements to be followed by wholesale dealers in attending hearings, depositing checks, filing reports of checks returned unpaid by the bank, and maintaining records. The violation of such regulations when duly promulgated and enacted may be cause for suspension or revocation of the violator's license by the commissioner. Any action of the commissioner under this Section

providing for suspension or revocation of a permit shall be preceded by a notice to the violator and hearing by the commissioner or his agent.

## **Louisiana Administrative Code 55:VII.307**

### **§ 307. Regulation IV -Definitions and Explanations**

#### A. Definitions

“Alcoholic Beverages”-[as used in R.S. 26:80(E), (F), (G), and (H)] interpreted as defined in R.S. 26:2(1)

“Bona fide wholesaler” means a dealer who in good faith truly and openly conducts the business of wholesaling alcoholic beverages to retailers in an immediate trade area without any simulation or pretense as to his true classification as a wholesaler.

“Immediate trade area” as used in R.S. 26:82 means that geographical area in which a wholesale permittee in good faith actually carries on and intends to carry on a bona fide wholesale business by regular sales and deliveries of alcoholic beverages on hand to at least 20 percent of the retail permittees carrying on business in such area with separate sales to said retailers accounting for at least 50 percent of the gallonage handled by said wholesale permittee.

“Liquor”-[as used in R.S. 26:80(D)] interpreted as defined in R.S. 26:2(1)

B. Every bona fide wholesale dealer must necessarily have an immediate trade area the size of which depends upon the scope and extent of his operation.

C. Every applicant for a wholesale license must define his immediate trade area, as defined above, at the time of application. An applicant’s designation must be reasonable and must not contain artificial or unrealistic areas, or areas amounting to a pretense or simulation.

D. No wholesale permit shall be issued to any applicant, or, if issued no wholesale permit shall be held by any permittee unless such applicant or permittee, at all times throughout the license year, meets and maintains, in addition to all other qualifications and requirements provided by law, the applicable standards set forth in R.S. 26:82, and in these regulations.

E. A Schedule B is required by the board of every wholesale permit applicant. This schedule must be filed prior to the issuance or renewal of any wholesale permit and must be answered in anticipation of the coming year’s operation.

F. At any time during the license year, the board may require any wholesale dealer to file with the board any pertinent information requested in connection with his classification as a wholesale dealer.

G. At any time during the license year, the board may order an inspection and audit of any wholesale dealer in connection with his classification as a wholesale dealer.

H. All inspections and audits made and all Schedule B’s on file shall remain confidential in the board’s files, unless and until the same are used in connection with enforcement purposes or any denial, suspension or revocation proceeding.



17. Is applicant a new ownership to succeed an established on-going business?  Yes  No  
 If yes, name of previous owner: \_\_\_\_\_  
 17a. Trade Name of Business: \_\_\_\_\_  
 17b. Permit Number: \_\_\_\_\_  
 17c. Class and Type: \_\_\_\_\_

18. Does this applicant have knowledge of two (2) separate beer taxes (STATE AND LOCAL), tax reports, and payment of taxes?  Yes  No  
 If no, please explain below or in an attachment.

19. Has applicant applied to local authorities for a "wholesale dealer" permit?  Yes  No  
 If no, please explain below or in an attachment.

20. Does this applicant know of the beer cash laws and regulations?  Yes  No If no, please explain below or in an attachment.  
**Note:** Each applicant wishing to obtain a "wholesale dealer" permit is encouraged to become familiar with beer cash laws and regulations (Title 55:VII).

21. Does this applicant maintain warehouse space?  Yes  No If yes, select below how warehouse space is maintained.  
 Owned by applicant  Leased by applicant

22. Is the warehouse space maintained by this applicant sufficient to store, at one time, a stock of alcohol equal to at least 10% of its annual case volume of alcohol sales at wholesale to retailers?  Yes  No

23. Does this applicant maintain, at all times, a stock of alcohol in its warehouse which is owned by the applicant, not consigned, and which cost \$50,000 or more to acquire?  Yes  No

24. Does this applicant maintain delivery equipment?  Yes  No If yes, select below how equipment is maintained.  
 Owned by applicant  Leased by applicant

25. Will this applicant maintain brand representation?  Yes  No If yes, provide the details requested in questions 26 & 27 of this application.

26. List, **\*by attachment**, each brand of malt beverage this business intends to sell **NOT** containing more than six percent alcohol by volume, the manufacturer, and the manufacturer's city and state. **\*Apply attachment to this application regarding this requested information.**

27. List, **\*by attachment**, each brand of malt beverage this business intends to sell that contains **MORE** than six percent alcohol by volume, the manufacturer, and the manufacturer's city and state. **\*Apply attachment to this application regarding this requested information.**

28. \*State the parishes in which this applicant maintains sales of alcohol to retailers at wholesale and give the number of retailers that it sells alcoholic Beverages to in each of those parishes in the space provided below.

Parish	Number of Retailers

**\*Apply attachment to this application if necessary.**

29. Will this applicant's sales to retailers account for at least 50% of the gallonage it handles, excluding sales made by the applicant to retailers in which it holds interest.  Yes  No

**Wholesale Malt Beverage Permit Fee: \$1000.00**

This affidavit must be signed by the owner, if individual ownership; authorized partner, if partnership; or authorized officer and/or official, if corporation or LLC. Misstatement or suppression of material facts in this application is grounds for denial of this permit. Conviction of filing false public records, a violation of Louisiana Revised Statute 14:133, may result in imprisonment for not more than five years with or without hard labor and fines of not more than \$5000.00 (five thousand dollars), or both.

**Affidavit**

I hereby apply for a Wholesale Malt Beverage Permit as required by Title 26 of Louisiana Revised Statutes. Under the penalties of perjury, I declare that I have examined this application, including all accompanying documents, and to the best of my knowledge and belief, it is true, correct, and complete.

Signature: \_\_\_\_\_ Title: \_\_\_\_\_

Print/Type your name: \_\_\_\_\_

Sworn to and subscribed to me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

in the parish/county of \_\_\_\_\_ State of \_\_\_\_\_

Notary Public's Signature: \_\_\_\_\_ Print Name of Notary Public: \_\_\_\_\_



LOUISIANA DEPARTMENT OF REVENUE  
 OFFICE OF ALCOHOL AND TOBACCO CONTROL  
 P.O. BOX 66404  
 BATON ROUGE, LOUISIANA 70896-6404  
 TELEPHONE (225) 925-4041 – FAX (225) 925-7652

**Wholesaler Schedule “B”**

Name: _____		
Location Address: _____		
Mailing Address: _____		
Phone Number: (____) _____		
<b>Part I – Warehouse Space</b>		
A. Do you maintain warehouse space: <input type="checkbox"/> Owned by you <input type="checkbox"/> Leased by you <input type="checkbox"/> Dedicated exclusively to your use in a public warehouse		
B. Is the warehouse space maintained by you sufficient to store, at one time, a stock of alcohol equal to at least 10% of your annual case volume of alcohol sales at wholesale to retailers? <input type="checkbox"/> YES <input type="checkbox"/> NO		
<b>Part II – Warehouse Stock</b>		
Do you maintain, at all times, a stock of alcohol in your warehouse which is owned by you, not consigned, and which cost \$50,000 or more to acquire? <input type="checkbox"/> YES <input type="checkbox"/> NO		
<b>Part III – Delivery Equipment</b>		
Do you maintain delivery equipment: <input type="checkbox"/> Owned by you <input type="checkbox"/> Leased by you <input type="checkbox"/> Dedicated to your use		
<b>Part IV – Brand Registration</b>		
A. Do you maintain brand representation? <input type="checkbox"/> YES <input type="checkbox"/> NO		
B. If yes, give the name of at least one brand of a distillery or manufacturer you represent in the space provide below.		
Brand Name: _____	Manufacturer or Distillery: _____	City and State: _____
<b>Part V – Sales to Retailers</b>		
A. State the parishes in which you maintain sales of alcohol to retailers at wholesale and give the number of retailers you sell alcoholic beverages to in each of those parishes in the space provided below.		
<b>Parish</b>	<b>Number of Retailers</b>	
B. Do your sales to retailers account for at least 50% of the gallonage handled by you, excluding sales made by you to retailers in which you hold an interest? <input type="checkbox"/> YES <input type="checkbox"/> NO		
<b>Part VI – General</b>		
A. Do you, your spouse, any individual, any corporation, or any other party associated with this business hold any interest in any manufacturing permit or retail permit? <input type="checkbox"/> YES <input type="checkbox"/> NO		
B. Is any of your wholesale stock of alcohol stored on the premises of any retail establishment? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, give the location _____ and amount stored there _____		
C. Are you primarily engaged in exporting alcohol from this state? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, give the volume of gallonage exported _____ and total gallonage handled _____		
D. Are you subsidized, financed, or employed by a manufacturer to operate your business? <input type="checkbox"/> YES <input type="checkbox"/> NO If yes, what is your relationship with the other party? _____		

**Affidavit of Applicant for Wholesaler Permit**

Before me, the undersigned Notary Public, personally came and appeared the undersigned person, who, after being duly sworn did depose and state that:

1. I have read and understood each of the questions contained in this application;
2. The answers given to each question contained in this application are true and correct to the best of my knowledge and belief;
3. I meet the qualifications and conditions set out in Louisiana Revised Statutes 26:80 and 280;
4. I have no interest whatsoever in any establishment holding a retail beer or liquor permit;
5. I understand that any misstatement or suppression of fact in this application or any accompanying documents is grounds for denial of this application for a wholesale permit.

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Printed Name

\_\_\_\_\_  
Social Security Number

\_\_\_\_\_  
Title

\_\_\_\_\_  
Business

Subscribed before me, the undersigned Notary Public, on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ in the city of \_\_\_\_\_, parish of \_\_\_\_\_, State of Louisiana.

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Signature





State of Louisiana  
Office of Alcohol and Tobacco Control  
7979 Independence Blvd., Suite 101  
P.O. Box 66404 Baton Rouge, LA 70896-6404  
Telephone (225) 925-4041 · Fax (225) 925-7652

<b>FOR OFFICE USE ONLY</b>
Permit Number: _____
Sequence Number: _____

### Wholesaler Schedule A

1. Applicant's Name (individual, partnership, corporation, LLC): _____				2. Trade Name of Business (if applicable): _____	
3. Location Address of Applicant (street/city/state/zip): _____					
4. Name of person to be certified (Enter Full Legal Name): _____				5. Daytime Phone #: _____ (      )      -	
6. Residence Address (street/city/state/zip): _____					
7. Race: _____	8. Sex: _____	9. Date of Birth: _____	10. Social Security Number: _____		11. Driver's License # and State: _____
12. Place of birth? _____		13. Are you a citizen of the United States? <input type="checkbox"/> Yes <input type="checkbox"/> No		14. Naturalization Number (if applicable) _____	
15. Are you a citizen of Louisiana? <input type="checkbox"/> Yes <input type="checkbox"/> No			16. Have you continuously resided in Louisiana for the past two years? <input type="checkbox"/> Yes <input type="checkbox"/> No		
17. Are you married? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, provide full name, Social Security Number and Date of Birth of Spouse. _____					
18. Do you, your spouse, any individual, any corporation, or any other party associated with this business hold any interest in any manufacturing or retail alcohol permit? <input type="checkbox"/> Yes <input type="checkbox"/> No <b>If yes, answer the following questions in this section (provide attachment if necessary).</b>					
18a. Owner Name of business: _____					
18b. Trade Name of Business: _____					
18c. Permit Number: _____					
18d. Location Address: _____					
18e. Class and Type: _____					
18f. Type of Interest: _____					
18g. Equity Interest Held (provide attachment if necessary): _____					
19. Have you or your spouse ever been convicted of a felony? This includes any offense adjudicated under Article 893. <input type="checkbox"/> Yes <input type="checkbox"/> No <b>If yes, complete Schedule "F" as provided by this office.</b>					
20. Have you or your spouse ever been convicted of violating any liquor or beer regulatory statute or rule? <input type="checkbox"/> Yes <input type="checkbox"/> No					
21. Have you or your spouse ever been convicted of solicitation for prostitution, pandering, letting premises for prostitution, contributing to the delinquency of a juvenile, keeping a disorderly place, or dealing in narcotics? <input type="checkbox"/> Yes <input type="checkbox"/> No					
22. Have you or your spouse had a license or permit to sell or deal in alcoholic beverages revoked within the last two years prior to the filing of this schedule? <input type="checkbox"/> Yes <input type="checkbox"/> No					
23. Have you or your spouse ever been denied an alcoholic beverage permit? <input type="checkbox"/> Yes <input type="checkbox"/> No					
24. If the response to Questions 19 and 21 is "yes," state the offense, date, location, and provide <b>certified copied</b> of the disposition to include documents relative to felony pardons. If the response to Questions 20, 22, and 23 is "yes," state the offense, date, and location. <b>Apply attachments if necessary.</b>					
25. Have you or your spouse ever had or used any name(s) other than the one stated above ( <b>Official name change, maiden name, alias, nickname, etc.</b> )? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, please list _____					
26. Are you employed by the State of Louisiana? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, enter the name of the department. _____					
27. Is this application being made by you to permit any person other than yourself to secure a beer/liquor permit in your name for his/her benefit? <input type="checkbox"/> Yes <input type="checkbox"/> No					

**Misstatement or suppression of material facts in this application is grounds for denial of this permit. Conviction of filing false public records, a violation of Louisiana Revised Statute 14:133, may result in imprisonment for not more than five years with or without hard labor and fines of not more than \$5000.00 (five thousand dollars), or both.**

#### Affidavit

I swear that I have read each of the above questions and the answers that I have given are true and correct to the best of my knowledge; and that I meet the qualifications and conditions set out in R.S. 26:80 and 26:280.

Signature: _____	Title: _____
Print/Type your name: _____	
Sworn to and subscribed to me this _____ day of _____, 20_____	
in the parish/county of _____ State of _____	
Notary Public's Signature: _____	Print Name of Notary Public: _____





Ernest P. Legier, Jr., Commissioner

## SCHEDULE A FORM INDIVIDUAL SUITABILITY DISCLOSURE FORM

**Note:** Must be executed by **EACH INDIVIDUAL** manager, owner, partner, financial backer, officer, agent, director, stockholder, member, or any person owning more than 5% of the stock or membership interest in the business.

### BUSINESS INFORMATION

1. Business/Entity Legal Name: (Name of individual or business entity)	
2. Trade Name (DBA):	
3. Business Address: (Street Address, City, State, and Zip code)	
4. Business Phone Number:	5. Business Email Address:

### INDIVIDUAL INFORMATION

6. Individual Affiliation with Business: <input type="checkbox"/> Manager <input type="checkbox"/> Officer/Member/Director <input type="checkbox"/> Partner <input type="checkbox"/> Other: _____ <input type="checkbox"/> Investor <input type="checkbox"/> Stockholder/Shareholder <input type="checkbox"/> Owner			
7. Full Name		8. Maiden name/alias/nickname/former legal name:	
9. Occupation:		10. Employer:	
11. Date of Birth:	12. Age:	13. Place of Birth:	
14. Business Phone Number:		15. Cell Number:	
16. Email Address:		17. Mailing Address:	
18. Social Security Number:			
19. Race:	20. Gender:	21. Driver's License Number:	22. State of Issuance
23. Is a colored copy of your driver's licensed attached to this form?			<input type="checkbox"/> YES <input type="checkbox"/> NO
24. Have you continuously resided in Louisiana for the last two (2) years?			<input type="checkbox"/> YES <input type="checkbox"/> NO
25. Are you a U.S. Citizen? <input type="checkbox"/> YES <input type="checkbox"/> NO, enter Naturalization number:			
26. Affiliation with Business: (Job Title/Position)		27. Percentage of Ownership:	

### MARITAL/SPOUSAL INFORMATION

P.O. Box 66404, Baton Rouge, LA 70896-6404 \* 7979 Independence Boulevard, Suite 101, Baton Rouge, LA 70806  
Telephone: (225) 925-4041



Ernest P. Legier, Jr., Commissioner

28. Select Marital Status: <input type="checkbox"/> Married <input type="checkbox"/> Single <input type="checkbox"/> Divorced <input type="checkbox"/> Legally separated	
29. Name of Spouse:	
30. Spouse Maiden Name/Alias (if applicable):	
31. Spouse's Date of Birth:	32. Spouse's Social Security Number:
33. Spouse Driver's License No:	34. State of Issuance:
35. Is the marriage a community property regime? (separation of property agreement) <input type="checkbox"/> YES <input type="checkbox"/> NO	
36. Will Spouse assist in managing Applicant's business? <input type="checkbox"/> YES <input type="checkbox"/> NO	
37. Do you or your spouse own or hold interest in any other business holding a state retail alcoholic beverage permit? If yes, provide the following information. If more than one, please attach list. Permit Number: Trade Name: Location address:	
<input type="checkbox"/> YES <input type="checkbox"/> NO	

**QUALIFICATION**

38. Is the applicant applying for a video poker license issued by Louisiana State Police?	<input type="checkbox"/> YES <input type="checkbox"/> NO
39. Is this application being submitted by you to obtain an alcoholic beverage permit in your name for the benefit of any other person?	<input type="checkbox"/> YES <input type="checkbox"/> NO

**If you answered YES to any question listed below, a Schedule F Form must be completed.  
Applicant must attach a disposition of each arrest.**

**CRIMINAL BACKGROUND INFORMATION**

40. Have you or your spouse ever been convicted of violating any state or local alcoholic beverage statute, rule or ordinance?	<input type="checkbox"/> YES <input type="checkbox"/> NO
41. Have you or your spouse had any license or permit to sell or deal in alcoholic beverages revoked within the last two (2) years prior to filing this form?	<input type="checkbox"/> YES <input type="checkbox"/> NO
42. Have you or your spouse ever been denied an alcoholic beverage permit?	<input type="checkbox"/> YES <input type="checkbox"/> NO
43. Have you or your spouse ever been arrested for a felony charge?	<input type="checkbox"/> YES <input type="checkbox"/> NO
44. Have you or your spouse ever been convicted of a felony?	<input type="checkbox"/> YES <input type="checkbox"/> NO
45. Have you or your spouse ever had a conviction adjudicated under 893 or 894, dismissed, pardoned, expunged, pled guilty or pled nolo contendere or "no contest"?	<input type="checkbox"/> YES <input type="checkbox"/> NO
46. Have you or your spouse ever been convicted of solicitation for prostitution, pandering, letting premises for prostitution, contributing to the delinquency of a juvenile, keeping a disorderly place, or dealing in controlled dangerous substances?	<input type="checkbox"/> YES <input type="checkbox"/> NO
47. Have you or your spouse ever been convicted of distributing or possessing with intent to distribute any controlled dangerous substance on any premises holding an alcoholic beverage permit where you held or hold an ownership interest in the business?	<input type="checkbox"/> YES <input type="checkbox"/> NO
48. Have you or your spouse been convicted or has a judgment of court rendered against you involving the sale or service of alcoholic beverage by this or any other state or in the U.S. within the last two (2) years?	<input type="checkbox"/> YES <input type="checkbox"/> NO
49. Have you or your spouse ever been convicted in this or in any other state in the U.S. of theft?	<input type="checkbox"/> YES <input type="checkbox"/> NO
50. Have you or your spouse ever been convicted in this or in any other state in the U.S. of any crime involving false statements or declarations?	<input type="checkbox"/> YES <input type="checkbox"/> NO
51. Have you or your spouse ever been convicted in this or in any other state in the U.S. of gambling?	<input type="checkbox"/> YES <input type="checkbox"/> NO

**DISCLOSURE OF OTHER INTEREST IN ALCOHOL INDUSTRY**



Ernest P. Legier, Jr., Commissioner

**& UNFAIR BUSINESS AND TRADE PRACTICES**

52. Does Applicant understand it is prohibited to directly or indirectly have any overlapping ownership or any other prohibited relationship between those engaged in the business related to the alcoholic beverage industry such as engaging as a retailer/wholesaler, retailer/manufactur <sup>*</sup> , or wholesaler/manufactur <sup>*</sup> .	<input type="checkbox"/> YES <input type="checkbox"/> NO
53. Does Applicant or applicant's spouse receive any proceeds or profits from any alcoholic beverage retailer, wholesaler or manufacturer? If Yes, provide additional details below or attached detail explanation.	<input type="checkbox"/> YES <input type="checkbox"/> NO
54. Does Applicant understand that alcoholic beverage manufacturers and wholesalers are prohibited from providing an alcohol retailer with anything of value unless explicitly enumerated as an exception as provided by law or regulation?	<input type="checkbox"/> YES <input type="checkbox"/> NO
55. Does Applicant understand that manufacturers and wholesalers are prohibited from inducing or otherwise influencing, directly or indirectly, a retailer from selling and/or serving its products to the exclusion, in whole or in part, of products of other manufacturers and/or wholesalers, including but not limited to influencing the retailer in any way regarding the quality or brand of alcoholic beverages bought or sold by the retailer?	<input type="checkbox"/> YES <input type="checkbox"/> NO
56. Does Applicant understand that retailers are prohibited from accepting or requiring any such inducement or other influence and anyone found in violation of the trade practices laws and regulation of the State of Louisiana, is subject to penalties, suspension or revocation of its permit?	<input type="checkbox"/> YES <input type="checkbox"/> NO

**SWORN STATEMENT/AFFIDAVIT**

*I swear that I have read each of the above questions and that the answers that I have given are true and correct to the best of my knowledge and that I meet the qualifications and conditions set forth in La. R.S. 26:80 and 26:280. I consent to this information being shared with the Louisiana State Police for video poker licensing purposes.*

---

 Print Name

---

 Signature

---

 Title

---

 Date
**Notary**

*Sworn to and subscribed to me on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, in the parish/county of \_\_\_\_\_, State of \_\_\_\_\_*

---

 Name of Notary Public

---

 Signature of Notary Public

Office Use Only

Process by:

Permitted by and date:

Approval By &amp; Date:



Ernest P. Legier, Jr., Commissioner

**SCHEDULE F FORM  
CRIMINAL HISTORY DISCLOSURE FORM**

**Who is required to complete?**

This form must be completed by any applicant who has been convicted of a felony and seeks lawful issuance of an alcoholic beverage permit under the provisions of R.S. 26:80(f) and/or 26:280(f). Applicant attests that the felony was not a crime of violence as defined in LA R.S. 14:2B, and that 10 years or more have passed between the date of this application and the successful completion of any sentence, deferred adjudication, or period of probation, parole, and the final discharge of the defendant. Applicant is required to submit official documentation of pardon, restoration of rights, or official certification that 10 years or more has passed since successful completion of any sentence, deferred adjudication, or period of probation or parole and the final discharge of the defendant at the time of application.

If you have been convicted of a crime of violence as defined in La. R.S. 14:2B, you will not qualify for an alcoholic beverage permit. See ATC's website for additional information and see frequently asked questions at [www.atc.la.gov](http://www.atc.la.gov) or definition of crime of violence at <https://www.legis.la.gov/Legis/Law.aspx?d=78337>.

BUSINESS INFORMATION		
1. Business Legal Name: (Name of individual or business entity)		
2. Trade Name (DBA):		
3. Business Address:		
4. City:	5. Zip Code:	6. County/Parish:

INDIVIDUAL INFORMATION			
7. Affiliation with Business:			
8. Print Name:		9. Maiden name/alias/nickname/former legal name:	
10. Date of Birth:		11. Place of Birth:	
12. Business Phone Number:		13. Cell Number:	
14. Email Address:		15. Mailing Address:	
16. Social Security Number:			
17. Race:	18. Gender:	19. Driver's License Number:	20. State of Issuance

Office Use Only:



Ernest P. Legier, Jr., Commissioner

**HISTORY OF ARREST AND CONVICTION**

Arrest Charge/Conviction (Statute)	Date of Arrest of Conviction	Jurisdiction/Court Agency	Date of Discharge or Disposition

**APPLICANT MUST ATTACH A DISPOSITION OF EACH ARREST AND/OR CONVICTION LISTED ABOVE. FAILURE TO SUBMIT A DISPOSITION MAY RESULT IN PROCESSING DELAYS OR DENIAL.**

**Sworn Statement and Affidavit**

*I swear that I have read each of the above questions and the answers that I have given are true and correct to the best of my knowledge and that I meet the qualifications and conditions set forth in La. R.S. 26:80 and 26:280. I consent to this information being shared with the Louisiana State Police for video poker licensing purposes.*

\_\_\_\_\_  
Print Owner/Officer/Member Name

\_\_\_\_\_  
Title

\_\_\_\_\_  
Signature of Owner/Officer/Member

\_\_\_\_\_  
Date

**Notary**

Sworn to and subscribed to me on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, in the parish/county of \_\_\_\_\_, State of \_\_\_\_\_

\_\_\_\_\_  
Name of Notary Public

\_\_\_\_\_  
Signature of Notary Public

*Office Use Only*

Process by: \_\_\_\_\_

Date Submitted: \_\_\_\_\_

Approval By & Date: \_\_\_\_\_

ATN: \_\_\_\_\_

SID: \_\_\_\_\_

**RAPSHEET DISCLOSURE  
BUREAU OF CRIMINAL IDENTIFICATION AND INFORMATION  
P.O. BOX 66614 (MAIL SLIP A-6)  
BATON ROUGE, LA 70896**

\_\_\_\_\_  
AGENCY, BUSINESS OR INDIVIDUAL NAME

\_\_\_\_\_  
MAILING ADDRESS

\_\_\_\_\_  
CITY STATE ZIP CODE

**NOTICE:  
PLEASE PRINT OR TYPE  
INFORMATION, EXCLUDING  
ADMINISTRATORS OR AUTHORIZED  
PERSONS SIGNATURE.  
  
INCOMPLETE FORMS WILL NOT BE  
PROCESSED.**

APPLICANT NAME: \_\_\_\_\_ DATE OF BIRTH: \_\_\_\_\_

RACE: \_\_\_\_\_ SEX: \_\_\_\_\_ HEIGHT: \_\_\_\_\_ WEIGHT: \_\_\_\_\_

HAIR COLOR: \_\_\_\_\_ EYE COLOR: \_\_\_\_\_ BIRTH STATE: \_\_\_\_\_

SOCIAL SECURITY NUMBER: \_\_\_\_\_ DRIVER LICENSE/ID: \_\_\_\_\_

**DO NOT WRITE BELOW THIS LINE: (For Bureau of Criminal Identification and Information Use Only)**

**CRIMINAL HISTORY DETERMINATION**

**ALL INFORMATION RELEASED MUST REMAIN STRICTLY CONFIDENTIAL AND ONLY THOSE  
AUTHORIZED BY LAW TO RECEIVE THIS INFORMATION MAY SUBMIT A REQUEST.**

**NOTICE:** The response to your request for a criminal history check is based on a review of the State of Louisiana's criminal history records database as is available at the time of request. This does not preclude the possible existence of an arrest or conviction information not available in our database.

RAPSHEET ATTACHED

RESPONSE BELOW







Ernest P. Legier, Jr., Commissioner

**CRIMES OF VIOLENCES**

**A "Crime of Violence" as defined in La. R.S. 14.2B includes any crimes listed below. If you have been convicted of any of the felonies listed below, you shall be disqualified for an alcoholic beverage permit.**

- |  |   |
|--|---|
| (1) Solicitation for murder.                                 | (46) Vehicular homicide, when the operator's blood alcohol concentration exceeds 0.20 percent by weight based on grams of alcohol per one hundred cubic centimeters of blood.                           |
| (2) First degree murder.                                     | (47) Aggravated assault upon a dating partner.  |
| (3) Second degree murder.                                    | (48) Domestic abuse battery punishable under R.S. 14:35.3(M)(2) or (N).   |
| (4) Manslaughter.  | (49) Battery of a dating partner punishable under R.S. 14:34.9(L)(2) or (M).  |
| (5) Aggravated battery.                                      | (50) Violation of a protective order if the violation involves a battery or any crime of violence as defined by this Subsection against the person for whose benefit the protective order is in effect. |
| (6) Second degree battery.                                   | (51) Criminal abortion.   |
| (7) Aggravated assault.                                      | (52) First degree feticide.   |
| (8) Repealed by Acts 2017, No. 281, §3.                      | (53) Second degree feticide.  |
| (9) Aggravated or first degree rape.                         | (54) Third degree feticide.   |
| (10) Forcible or second degree rape.                         | (55) Aggravated criminal abortion by dismemberment.   |
| (11) Simple or third degree rape.                            |   |
| (12) Sexual battery.   |   |
| (13) Second degree sexual battery.                           |   |
| (14) Intentional exposure to AIDS virus.                     |   |
| (15) Aggravated kidnapping.                                  |   |
| (16) Second degree kidnapping.                               |   |
| (17) Simple kidnapping.                                      |   |
| (18) Aggravated arson.                                       |   |
| (19) Aggravated criminal damage to property.                 |   |
| (20) Aggravated burglary.                                    |   |
| (21) Armed robbery.  |   |
| (22) First degree robbery.                                   |   |
| (23) Simple robbery.   |   |
| (24) Purse snatching.  |   |
| (25) Repealed by Acts 2017, No. 281, §3.                     |   |
| (26) Assault by drive-by shooting.                           |   |
| (27) Aggravated crime against nature.                        |   |
| (28) Carjacking.   |   |
| (29) Repealed by Acts 2017, No. 281, §3.                     |   |
| (30) Terrorism.  |   |
| (31) Aggravated second degree battery.                       |   |
| (32) Aggravated assault upon a peace officer.                |   |
| (33) Aggravated assault with a firearm.                      |   |
| (34) Armed robbery; use of firearm; additional penalty.      |   |
| (35) Second degree robbery.                                  |   |
| (36) Disarming of a peace officer.                           |   |
| (37) Stalking.   |   |
| (38) Second degree cruelty to juveniles.                     |   |
| (39) Aggravated flight from an officer.                      |   |
| (40) Repealed by Acts 2014, No. 602, §7, eff. June 12, 2014. |   |
| (41) Battery of a police officer.                            |   |
| (42) Trafficking of children for sexual purposes.            |   |
| (43) Human trafficking.                                      |   |
| (44) Home invasion.  |   |
| (45) Domestic abuse aggravated assault.                      |   |



Ernest P. Legier, Jr., Commissioner

ELECTRONIC FINGERPRINT CERTIFICATION FORM

Notice: In lieu of submitting fingerprint cards, Applicants for Alcohol or Tobacco permits may complete electronic fingerprints at the Louisiana State Police Headquarter, located at 7919 Independence Blvd, Baton Rouge, LA 70806. Applicants completing electronic fingerprints is required to remit the additional electronic submission fee and this completed form to the ATC.

\*\*\*\* IF APPLICANT SUBMITTED FINGERPRINTS ELECTRONICALLY\*\*\*\*

Please submit:
ELECTRONIC SUBMISSION FEE: \$10.00

SUBMIT CERTIFICATION FORM: LOUISIANA OFFICE OF ALCOHOL TOBACCO CONTROL
7979 INDEPENDENCE BLVD., SUITE 101
BATON ROUGE, LA 70806

SUBMIT FEE TO LSP: \$10.00 for electronic submission of fingerprints directly to Louisiana State Police

\*\*\*Money Orders or Cashier's Check ONLY.
\*\*This fee is in addition to the background processing fee of \$39.25

WHEN TO SUBMIT: If applicant submit fingerprints electronically, a complete copy of this certification form must be submitted with application. ATC will not process the application without verification that all required fingerprints have been submitted.

I, \_\_\_\_\_ (print name), hereby certify that I am applying for an alcoholic beverage permit with the Louisiana Office of Alcohol and Tobacco Control (ATC), that I have submitted my fingerprints electronically at an office provided by Louisiana State Police (LSP), and that I have submitted the necessary authorization form to allow ATC to receive the results of my criminal background report from the FBI and LSP as mandated by La R.S. 26:80 and La. R.S. 26:280.

Applicant's Signature

Date of Fingerprint Submission

Signature of Employee Administering Fingerprints

Print Name of Employee

Address of Location where Fingerprints were submitted

## A Note from the Louisiana Office of Alcohol & Tobacco Control

As the agency tasked with regulating alcoholic beverage and tobacco commodities, one of our main goals here at ATC is to promote awareness and understanding throughout the industry of the Alcoholic Beverage and Tobacco Laws and Regulations. As such, we feel that it may be helpful to provide you with a few commonly un-known or misunderstood provisions of law. Did you know...

- Licensed Louisiana retail dealers of alcohol and tobacco products can only purchase their inventory from licensed Louisiana wholesale dealers.
- 6% price mark-up provisions apply to alcohol and tobacco products.
- Permits are issued per location address and only one alcoholic beverage permit can be issued to an address (i.e. you cannot have two classes of permits at one address).
- **Public habitable area** means publicly accessible space, within a structure, which is permanent in nature, is in compliance with applicable building codes, is fully enclosed and climate controlled.
- Employees selling or serving alcoholic beverage and tobacco products must obtain a Responsible Vendor Certification within 45 days of employment.
- Retail dealers are required to maintain alcoholic beverage and tobacco invoices as well as employee records on the licensed premise at all times.
- Managers must be registered and certified by ATC. It is important to supply a Schedule A on all appointed managers.
- ATC is authorized to accept documentation and provide information to anyone registered with a business. As such, it is imperative, for the safety your business information, to maintain current ownership and management records with ATC.
- Smoking is not allowed on any areas of a Class B, C (package stores), or AR premise (restaurant).
- Placing signs provided by wholesalers/suppliers outside your business is prohibited (this also includes utility items such as table umbrellas).
- The sale of single cigarettes is prohibited.

A complete copy of the Alcoholic Beverage and Tobacco laws and regulations can be downloaded from the ATC website at [www.atc.la.gov](http://www.atc.la.gov). We are always happy to assist you with any questions or concerns at (225)925-4041. Additionally, we encourage you to help us promote responsible business practices by reporting violations of the alcoholic beverage and tobacco laws to our complaint line at (225)925-4070.