



Out-of-State Winery License Application

Section 1. General Information

If the applicant is an individual, list the individual's name below. If the applicant is a partnership, limited liability partnership (LLP), corporation or limited liability corporation (LLC), list the business' name below.

Name of Applicant(s) _____

Federal Employer Identification Number - **OR**

Social Security Number - -

Current License Number (if available) - - -

Business Name _____

Contact Person _____

Telephone _____ Cell Phone _____

Fax _____ Email Address _____

Check this box if you prefer to receive an annual reminder email to complete your renewal electronically.

Principal Place of Business _____
(Street Address, City, State Zip Code)

Mailing Address _____
(Street Address, City, State Zip Code)

Section 2. Type of Transaction and Fees

New License Transfer of Ownership

Corporate Structure Change Direct Shipment Endorsement

\$400 New License Fee

\$200 Processing Fee (required for all transactions)

\$50 Direct Shipment Endorsement Fee (This fee is necessary to ship directly to consumers.)

\$. Total Amount Enclosed

Section 3. Corporate Statement

All entities, except sole proprietorships, must provide the following information for all shareholders, members or partners. (Please attach additional pages if necessary.)

Please Print

1	Shareholder, Member or Partner Name	SSN
	Address	
	Date of Birth	Actual Number of Shares and % of Ownership
2	Shareholder, Member or Partner Name	SSN
	Address	
	Date of Birth	Actual Number of Shares and % of Ownership
3	Shareholder, Member or Partner Name	SSN
	Address	
	Date of Birth	Actual Number of Shares and % of Ownership
4	Shareholder, Member or Partner Name	SSN
	Address	
	Date of Birth	Actual Number of Shares and % of Ownership

Officers and Directors (use additional sheet of paper if necessary)

1	Officer or Director Name	SSN
	Address	
	Date of Birth	Title
2	Officer or Director Name	SSN
	Address	
	Date of Birth	Title
3	Officer or Director Name	SSN
	Address	
	Date of Birth	Title
4	Officer or Director Name	SSN
	Address	
	Date of Birth	Title

Section 4. Questions

1. Does any applicant, member, shareholder or partner have ownership in a retail alcoholic beverages license, agency liquor store, beer wholesaler or table wine distributor license in Montana?

Yes Please explain _____

No

A winery cannot hold any financial ownership or operational control in an agency liquor store, any retail alcoholic beverages license, beer wholesaler or table wine distributor license in Montana.

2. Do you intend to ship directly to consumers?

Yes If so, you will need to apply for the Direct Shipment Endorsement.

No

Section 5. Brands and Retailers

Please be aware that any product changes need to be sent to the Montana Department of Revenue for approval prior to distribution in Montana. Copies of all labels approved by the [Alcohol and Tobacco Tax and Trade Bureau](#) must be received and approved prior to shipping and/or distributing in Montana.

1. List all licensed Montana retailers authorized to sell your products at retail. These are businesses who will receive shipments from you. This does not include wine that is shipped via a licensed table wine distributor.

Name	Montana Liquor License Number	City/Town

Please be aware that every winery licensed to do business in Montana will need to report the amount of wine that it shipped into the state. The report, which includes a list of retailers who received shipments, is due on or before the 15th of the month for the previous month. The reporting forms, WIT and WIT-3, can be found on our website at http://revenue.mt.gov/home/liquor/beverage_tax.aspx.

Section 6. Additional Application Materials

- Copies of Alcohol and Tobacco, Tax and Trade Bureau ([TTB](#)) label approvals for each brand, which we'll need before approving distribution in Montana. Please include all varieties of a particular label.
- A copy of your basic permit issued by the [TTB](#).
- If applying as an individual or sole proprietor, you are required to file an Application for Assumed Business Name with the Montana Secretary of State's (SOS) office in order to conduct business in Montana. If applying as a partnership, limited liability partnership (LLP), corporation or limited liability corporation (LLC), you are required to register your entity with the SOS by completing an Application for Certificate of Authority to conduct business in Montana. You can obtain these forms on the SOS website at sos.mt.gov. Please send us a copy with your application.
- Liquor Division Authorization to Disclose Tax Information form.

Section 7. Declaration and Affidavit

I declare under penalty of false swearing that I am the applicant or the duly authorized representative of the entity making this application, and that the responses provided, including any accompanying information, are true, correct and complete.

Signature	Date	Printed Name	Title
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Mail completed application and all required and applicable documents to:

Montana Department of Revenue
Liquor Control Division
PO Box 1712
Helena, MT 59624-1712

Questions? Call us toll free at 1-866-859-2254 (in Helena, 444-6900), or fax 406-444-0722.