



**KODIAK ISLAND BOROUGH
CIGARETTE AND TOBACCO PRODUCTS
EXCISE TAX LICENSE APPLICATION**

Return with Payment to: Kodiak Island Borough Finance Department 710 Mill Bay Road Kodiak, Alaska 99615

LICENSE YEAR JANUARY 1, 20__ – DECEMBER 31, 20__

The license will be issued in the name of the applicant given below. All Borough cigarette or tobacco tax returns must be filed under the name of the licensee

BUSINESS OR INDIVIDUAL NAME		
MAILING ADDRESS OF APPLICANT	FEDERAL EIN OR SSN*	
	CONTACT NAME	TELEPHONE NUMBER
		FAX NUMBER
PHYSICAL LOCATION(S) WHERE THE LICENSE IS APPLICABLE	TYPE OF BUSINESS ACTIVITY:	
	<input type="checkbox"/>	A. BUYER
	<input type="checkbox"/>	B. DIRECT BUYER RETAILER
	<input type="checkbox"/>	C. DISTRUTOR/WHOLESALER
	<input type="checkbox"/>	D. MANUFACTURER
	<input type="checkbox"/>	E. VENDING MACHINE OPERATOR
	<input type="checkbox"/>	NUMBER OF VENDING MACHINES OPERATED
	<input type="checkbox"/>	F. RETAIL ONLY

*If your business hasn't been issued a Federal Employer Identification Number (EIN), please provide your social security number (SSN). The information is used by the KIB for identification purposes only.

Indicate the source of your cigarette and tobacco product purchases

LICENSE FEE:
 A \$100.00 LICENSE FEE MUST ACCOMPANY THIS APPLICATION
 MAKE CHECKS PAYABLE TO:

KODIAK ISLAND BOROUGH

NOTE:
A copy of your State of Alaska Cigarette and Tobacco Products License issued under AS 43.50.010 - .390 must accompany this application

SIGNATURE	DATE
NAME (PLEASE PRINT)	TITLE