



**Utah Department of
Alcoholic Beverage
Services**

1625 South 900 West
Salt Lake City, UT 84104

**INDUSTRY REPRESENTATIVE
APPLICATION CHECKLIST**

Mailing Address:

P.O. Box 30408
Salt Lake City, UT 84130-0408
☎: 801-977-6800 📧: abs.utah.gov

A complete application must be submitted no later than the **10th of any month to be considered for that month's commission meeting**. However, applying early is highly recommended to allow for processing and investigation. Any application submitted after the 10th will be considered on the following month's commission agenda

1. _____ Completed Application Form: Signed

2. _____ A **non-refundable** application fee: \$75 Initial Licensing Fee \$125 = \$200.00

3. _____ Criminal history background documents:
 - Electronic Fingerprints or Fingerprint card(s). Electronic fingerprinting (Live Scan) is available at DABC by appointment, at BCI, or a number of other FBI electronic fingerprint provider locations. (See [instructions](#)).
 - Signed "[Informed Consent and Waiver](#)" form
 - FBI Background fees: \$33.25 for each owner, corporate officer, director, or stockholder of 20% or more, managing agents, and managers responsible for directing or administration of alcohol operations.

4. _____ Ownership entity / organizational documents filed with Utah Department of Commerce
 - Individual / Sole Proprietor
 - If a Corporation, submit a copy of the Articles of Incorporation
 - If a Partnership, submit a copy of the written partnership agreement
 - If a Limited Liability Company, submit a copy of the Articles of Organization

5. _____ If applicant hold a federal importer's permit from the Alcoholic and Tobacco Tax and Trade Bureau, submit a copy

9. Residency status (list and attach proof of residency status for all individuals in section 8 who are not US citizens): _____

10. Criminal Offenses: List all criminal offenses other than minor traffic offenses of which you or any person listed that have been convicted or pending criminal charges (name, criminal offense, date of conviction – use additional sheets if necessary). _____

11. List the name and address of any manufacturer, supplier, or importer and the products the person will represent:
Provide a separate list if needed.

12. The applicant agrees to maintain on file with the department a current accounts list and agrees to notify the department in writing of any changes to the accounts listed within 14 days from the date the applicant either acquired or lost the account of a particular manufacturer, supplier, or importer.
 Yes I Agree

13. List locations where these products are stored in Utah other than the Department of Alcoholic Beverage Services:

14. Does the applicant hold a federal importer's permit from the Alcohol and Tobacco Tax and Trade Bureau?
 No Yes* *If yes, submit a copy.

ATTESTATION:

Read and initial each statement below:

_____ Applicant agrees as a condition of licensing that he/she has read and will abide by the provisions of Title 32B, Utah Code, and all rules of the commission and directives of the Department of Alcoholic Beverage Services; Applicant understands that the alcohol license may be suspended or revoked, including forfeiture of the bond, if the applicant fails to adhere to applicable laws and rules, or if the applicant no longer possesses the statutory qualifications for licensure.

_____ The applicant(s) attest(s) that they have not been convicted of any of the offenses listed below and stipulate(s) that if any disqualifying conviction is discovered, the license, permit, or package agency will immediately be surrendered.

1. Within seven years before the day on which the commission issues the package agency, license, or permit, a felony under a federal or state law.
2. Within four years before the day on which the commission issues the package agency, license, or permit, a violation of a federal or state law, or local ordinance concerning the sale, offer for sale, warehousing, manufacture, distribution, transportation, or adulteration of an alcoholic product, or a crime involving moral turpitude
3. On two or more occasions within the five years before the day on which the package agency, license, or permit is issued, driving under the influence of alcohol, drugs, or the combined influence of alcohol and drugs.

_____ Applicant agrees to immediately notify the department of any change in ownership entity and understands that failure to do so may result in immediate suspension of the license

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_____ The undersigned verifies that the premises will not be used for permitting gambling, illegal drugs, or any other violation of law or ordinance.

_____ The undersigned hereby authorizes the department's access to federal, state, and local sales, payroll, income, and real and personal property tax information.

_____ The undersigned verifies that the applicant complies with all federal and state laws pertaining to payment of taxes and contributions to unemployment and insurance funds.

_____ The undersigned applicant does not and will not discriminate against persons on the basis of race, color, sex, religion, ancestry, or national origin.

_____ The undersigned hereby voluntarily consents that representatives of the Alcoholic Beverage Services Department, Commission, State Bureau of Investigation (Bureau of Alcoholic Beverage Law Enforcement), and any other law enforcement agencies shall be admitted immediately and permitted without hindrance or delay to inspect the entire premises and all records of the licensee.

_____ The undersigned acknowledges that he/she has read and understands the statements herein and that the execution thereof is one voluntarily and by authorization of the applicant entity; and that **any false statement made on this application or any other related document is a second-degree felony. It may also result in suspension or revocation of the license.**

_____ The undersigned hereby makes application to the Utah Alcoholic Beverage Services Commission and certifies that the information contained herein and attached hereto is true and correct.

Date

Applicant / Owner of the business

Title / Position

Authorized Signature