



Kansas Department of Revenue
 Alcoholic Beverage Control Division
 915 S.W. Harrison Street, Room 214
 Topeka, KS 66625-3512
 Phone: 785-296-7015 Fax: 785-296-7185

Supplier Permit Application and Agreement Instructions

Requirements to Obtain a Kansas Supplier Permit:

- A. Supplier Permit Application and Agreement (ABC-1000).
- B. \$25.00 Supplier Permit Fee.
- C. Copy of your Basic Permit or Brewer's Notice.
- D. *If your company is not located in Kansas*, you are you are required to file the Irrevocable Consent to Jurisdiction form (ABC-160) with the Kansas Secretary of State. The Secretary of State's Office will return to you a copy of the ABC-160 form that has been stamped "FILED". You must then provide the ABC with a copy that has been stamped "FILED" along with the items listed above.

Instructions to Complete the ABC-1000 Supplier Permit Application and Agreement:

- 1. Permit Type.
 - a. New Permit. Check the "New Permit" box if you do not have a Kansas Supplier Permit or if your Kansas Supplier Permit has been expired for more than 30 days.
 - b. Renew Permit. Check the "Renew Permit" box to renew your current Kansas Supplier Permit.
- 2. Answer the questions. If you answer yes to either question, a Salesperson's Permit must be obtained for the person in Kansas soliciting sales from Kansas liquor licensees.
- 3. Check the appropriate "Application Entity Type", complete, sign and date the Supplier Permit Application and Agreement form, print your name and title.
- 4. Make a copy of the completed Supplier Permit Application and Agreement. Retain the copy for your records. This will serve as your permit.
- 5. Complete the attached Supplier Permit Voucher.
 - a. New Permit. Check the "New Permit" box, enter the name as it appears on the Supplier Permit Application and Agreement and check the box to indicate your \$25 Permit Fee is attached. Answer the questions in the "New Permits Only" section.
 - b. To Renew Permit. Check the "Renew Permit" box, enter your Supplier Name, Supplier Permit Number and check the box to indicate your \$25 Permit Fee is attached.
- 6. Make your check payable to the "Kansas Department of Revenue" and attach it to the completed Supplier Permit Voucher below.
- 7. Return the original completed Supplier Permit Agreement, a copy of your Basic Permit or Brewer's Notice and \$25.00 Supplier Permit fee to the ABC Marketing Unit. **Out-of-state applicants, who are applying for a new permit, must include a filed copy of the Irrevocable Consent to Jurisdiction (ABC-160).**

All approved Supplier Permits are posted to the ABC Active Liquor Licensee Database on the ABC website. To view your permit information, go to: <https://www.kdor.org/abc/licensee/>

To obtain monthly Supplier reporting forms and other information, visit our website at: <http://www.ksrevenue.org/abcsupper.html>

Direct your questions to the Marketing Unit at 785-296-7015 or email to ABC.Marketing.Unit@kdor.ks.gov



 Detach and Return with Payment

KANSAS ALCOHOLIC BEVERAGE CONTROL DIVISION

Supplier Permit Fee Voucher

Supplier DBA Name:	
<input type="checkbox"/> New Permit Attach the following documents: <input type="checkbox"/> Copy of your Federal Basic Permit or Brewer's Notice <input type="checkbox"/> Copy of your filed Irrevocable Consent to Jurisdiction (ABC-160) <input type="checkbox"/> Not required (Company is located in Kansas) <input type="checkbox"/> \$25.00 Permit Fee Enclosed (SLFE)	
<input type="checkbox"/> Renew Permit Number: 19 -	<input type="checkbox"/> \$25.00 Permit Fee Enclosed (SLFE)



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SUPPLIER PERMIT APPLICATION AND AGREEMENT

Permit Type (check one): <input type="checkbox"/> New Permit <input type="checkbox"/> Renew Permit			
Is your company located in Kansas? <input type="checkbox"/> No <input type="checkbox"/> Yes			
Applicant Entity Type (check one): <input type="checkbox"/> Individual <input type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> LLC <input type="checkbox"/> LLP			
Supplier Permit Number (renewals only) 19-	FEIN	Phone	
Supplier DBA Name	Supplier Entity Name		
Location Address	City	State	Zip
Mailing Address	City	State	Zip
Contact Person	E-mail Address		
Does your company use a compliance agency? <input type="checkbox"/> Yes* <input type="checkbox"/> No <i>*If yes, complete the compliance agency information.</i>	Compliance Agency Name		
Compliance Agency Mailing Address	Compliance Agency City	State	Zip
Compliance Agency Contact Person Name	Compliance Agency Phone		

The above named Brewer, Importer, Out-of-State Manufacturer or Vendor, hereafter referred to as "supplier", does hereby make application for a Supplier Permit to sell alcoholic liquor and/or cereal malt beverage to licensed distributors or non beverage users in the State of Kansas. In making this application, the above named supplier agrees that:

- a. It will not ship, sell, attempt to sell or deliver any alcoholic liquor and/or cereal malt beverage within the State of Kansas except to a licensed distributor, manufacturer or non-beverage user.
- b. It will not ship, sell, attempt to sell or deliver any alcoholic liquor and/or cereal malt beverage to any distributor who does not possess a franchise for such merchandise; and that all such sales to franchised distributors in the State of Kansas will be at the same price and without discrimination.
- c. It will register each brand of alcoholic liquor and/or cereal malt beverage with the Director prior to making shipments to distributors in this state.
- d. It will register and pay an annual fee in the amount of \$25 for each label of alcoholic liquor and cereal malt beverage proposed for sale in this state.
- e. It will submit monthly reports as required by the Director.
- f. It hereby appoints the Secretary of the State of Kansas its resident agent and representative authorized to accept service of any notice or order and that all such acts by the Secretary of State shall be fully binding upon the supplier.
- g. It will abide by all the provisions of the Kansas Liquor Control Act and the Rules and Regulations promulgated thereunder.

Authorized Signature

Date

Printed Name

Printed Title

MAKE A COPY FOR YOUR RECORDS

You will NOT receive a permit or certificate. Your copy will serve as your permit.

FOR OFFICE USE ONLY:

<input type="checkbox"/> \$25 Permit Fee Received Date _____	<input type="checkbox"/> New Permit Approved Date _____	Expires June 30, 20____
<input type="checkbox"/> Renew Permit From July 1, 20____ to June 30, 20____		Completed by: _____ Date: _____