ALCOHOLIC BEVERAGE CONTROL 109 SW 9<sup>th</sup> STREET P.O. Box 3506 TOPEKA KS 66601-3506



DEPARTMENT OF REVENUE PHONE: 785-296-7015 FAX: 785-296-7185 www.ksrevenue.gov/abc.html

# PACKAGING AND WAREHOUSING FACILITY PERMIT APPLICATION AND AGREEMENT INSTRUCTIONS

#### WHO CAN APPLY FOR THIS PERMIT?

This permit is available to any manufacturer or supplier of alcoholic liquor or cereal malt beverage, whether licensed in this state or any other state.

## REQUIREMENTS TO OBTAIN A KANSAS PACKAGING AND WAREHOUSING FACILITY PERMIT?

- A. Packaging and Warehousing Facility Permit Application and Agreement (ABC-828).
- B. \$2,500.00 annual permit fee.
- C. Request for Premises Approval (ABC-806).
- D. Irrevocable Consent to Jurisdiction form (ABC-160). If your company is not located in Kansas, you are required to file the Irrevocable Consent to Jurisdiction for (ABC-160) with the Kansas Secretary of State's Office. 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 your Application and Agreement.
- E. Copy of your Basic Permit or Brewer's Notice.
- F. Copy of your valid Manufacturer or Supplier license in this state or any other state.

### COMPLETING THE KANSAS PACKAGING AND WAREHOUSING FACILITY PERMIT APPLICATION AND AGREEMENT (ABC-828):

- 1. Permit Type.
  - a. New Permit. Check the "New Permit" box if you do not have a Kansas Packaging and Warehousing Facility Permit or if your Kansas Packaging and Warehousing Facility Permit has been expired for more than 30 days.
  - b. Renew Permit. Check the "Renew Permit" box to renew your current Kansas Packaging and Warehousing Facility Permit.
- 2. Check your appropriate "Application Entity Type", complete, sign and date the Kansas Packaging and Warehousing Facility Application and Agreement form, print your name and title.
- 3. Make a copy of the completed Packaging and Warehousing Facility Permit Application and Agreement. Retain the copy for your records.
- 4. Complete the attached Packaging and Warehouse Facility Permit Voucher.

☐ Copy of your filed Irrevocable Consent to Jurisdiction (ABC-160)

☐ Attach a copy of your valid Manufacturer or Supplies license.

☐ Copy of your valid Manufacturer or Supplier license

- a. New Permit. Check the "New Permit" box, enter the name as it appears on the Packaging and Warehousing Facility Permit Application and Agreement and the date completed. Attach a copy of your Federal Basic Permit or Brewer's Notice, a copy of your valid Manufacturer or Supplier license and a copy of the Filed Irrevocable Consent to Jurisdiction (ABC-160) if your business is not located in Kansas.
- b. <u>To Renew Permit.</u> Check the "Renew Permit" box, enter your Supplier Name, Packaging and Warehousing Facility Permit Number and the date completed and attach a copy of your valid Manufacturer or Supplier license.
- 5. Make your check payable to the "Kansas Department of Revenue" and attach it to the completed Packaging and Warehousing Facility Permit Voucher below.
- 6. Return the original completed Packaging and Warehousing Facility Permit Application and Agreement and the \$2,500.00 Packaging and Warehousing Facility Permit fee to the ABC Marketing Unit with the required documentation.

□ Not required (Company is located in Kansas)

☐ Renew Permit Number:

STATE OF KANSAS

Alcoholic Beverage Control 109 SW 9<sup>th</sup> Street P.O. Box 3506 Topeka KS 66601-3506



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# KANSAS PACKAGING AND WAREHOUSING FACILITY PERMIT APPLICATION AND AGREEMENT

Permit Type (check one): □New Permit □Renew Permit							
Applicant Entity Type (check one): □Individual □Corporation □Partnership □LLC □LLP							
Permit Number (renew permit only)			FEIN	Phone	Phone		
DBA Name			Entity Name				
Location Address			City	State		Zip Code	
Mailing Address			City	State		Zip Code	
Contact Person			E-mail Address				
Does your company use a compliance agency? *If yes, complete the compliance agency information.	□Yes*	□No	Compliance Agency Name				
Compliance Agency Mailing Address			City	State		Zip Code	
Compliance Agency Contact Person Name			Compliance Agency Phone				
in Kansas or to a Kansas supplier. c. It may transfer from the licensed premises of a p d. It will register with the Director each brand and warehousing facility that is intended for sale to di e. It hereby appoints the Kansas Secretary of State the Secretary of State shall be fully binding upon f. It will abide by all the provisions of the Kansas Li  Under penalties of perjury, I declare the information	d label of stributors its resider the manu quor Cont	alcoholic li in Kansas r nt agent and facturer or a rol Act and	quor and/or cereal malt bevera- orior to making shipments to licer d representative authorized to ac- supplier. the Rules and Regulations prom	used distributors in this cept service of any no ulgated thereunder.	s state. tice or order and tl		
Authorized Signature				Date			
Printed Name				Printed Title			
FOR OFFICE USE ONLY:							
□ \$2,500 Permit Fee Received Date	Initials						
□ New Permit Approved Date			Completed by:	Date:			
☐ Renew Permit From to			Completed by:	Date:			