

APPLICATION FOR CERTIFICATION - CIGAR LOUNGES

NORTH DAKOTA OFFICE OF STATE TAX COMMISSIONER SEN 23516

	O New C		Renewal: For Year	
Pursuant to North Dakota Century Code (N.D.C.C.) § 23-12-10, a request for certification as a Cigar Lounge is made on behalf of:				
Taxpayer Legal Name			Federal Employer Identification Number or Social Security Number	
Doing Business As Name (if different from line 1)			Business Telephone Number	
Mailing Address		City	State	ZIP Code
Organization Type	O Sole Proprietorship O Partnership	O General Partnership	O LLC	O Corporation
Prior year's annual gross income Prior year's annual income from cigar sales				
Please be sure to include documentation supporting the figures reported above with this application. This form and attachments should be submitted no later than February 1. Authorized Signature. I declare under the penalties of N.D.C.C. § 12.1-11-02, which provides for a Class A misdemeanor for making a false statement in a governmental matter, that this application, including any accompanying schedules and statements, has been examined by me and to the best of my knowledge and belief is a true, correct and complete application.				
Print Name of Authorize Signature	d Individual	Title		lephone Number

PRIVACY ACT NOTIFICATION

In compliance with the Privacy Act of 1974, disclosure of a social security number or Federal Employer Identification Number (FEIN) on this form is required under N.D.C.C. §§ 43-07-10, 43-07-11.1 and 57-01-15, and will be used for tax reporting, identification, and administration of North Dakota tax laws. Disclosure is mandatory. Failure to provide the social security number or FEIN may delay or prevent the processing of this form.

Mail to: Office of State Tax Commissioner

Business Registration

600 E. Boulevard Ave., Dept. 127 Bismarck, ND 58505-0599 Contact: Fax: 701-328-0332

Phone: 701-328-1241 Website: tax.nd.gov

Email: taxregistration@nd.gov

An established cigar lounge that contains a humidor, is fully enclosed, is equipped with an exhaust ventilation system, and has received certification from the Office of State Tax Commissioner may permit, only, the smoking of cigars purchased on site within the cigar lounge. Smoking of any other product in the cigar lounge is not allowed.

To receive certification from Office of State Tax Commissioner, a business must demonstrate that at least fifteen percent of their annual gross income is generated from the sale of cigars.

An application for certification as a cigar lounge must be submitted annually and be received by the Office of State Tax Commissioner prior to February 1.

Definitions

Cigar - means an individual roll of tobacco which has a wrapper or cover of whole leaf tobacco; does not contain filler other than tobacco filler; does not contain binder other than tobacco binder; does not contain additives other than water; does not contain a filter, tip, or nontobacco mouthpiece; weighs at least six pounds per thousand count; and is made by hand, except to allow for the use of a manually operated machine to assist in bunching, rolling, and binding.

Cigar Lounge - means a business dedicated, in whole or in part, to the smoking of cigars which generates fifteen percent or more of the business's annual gross income from the sale of cigars.

Instructions

Prior year's annual gross income

Enter the total gross income from your business for the prior calendar year. This figure must be supported by documentation that will be provided to the Office of State Tax Commissioner with this form. This documentation may include tax returns and/or schedules, financial statements, sales ledgers, etc.

Prior year's annual income from cigar sales

Enter the total gross sales income generated from the sale of cigars only for the prior calendar year. As with annual gross income, this figure must be supported by documentation supporting the amount entered.

Percentage of annual gross income

This number will be calculated by dividing cigar sales by annual gross sales, multiplied by 100 to represent a percentage.

Contact

If there are questions concerning this document and the supporting documentation required, please contact our office using the information on the front of this form.