Permits Online (PONL)

New Tobacco Importer Permit Application

The following PONL screens are equivalent to form TTB F 5230.4, Application for Permit to Import Tobacco Products or Processed Tobacco:

Screens Common to All Tobacco Industry Permit Applications	Page 2
Application for Original Entity ¹	Page 23
New Tobacco Importer:	Page 37

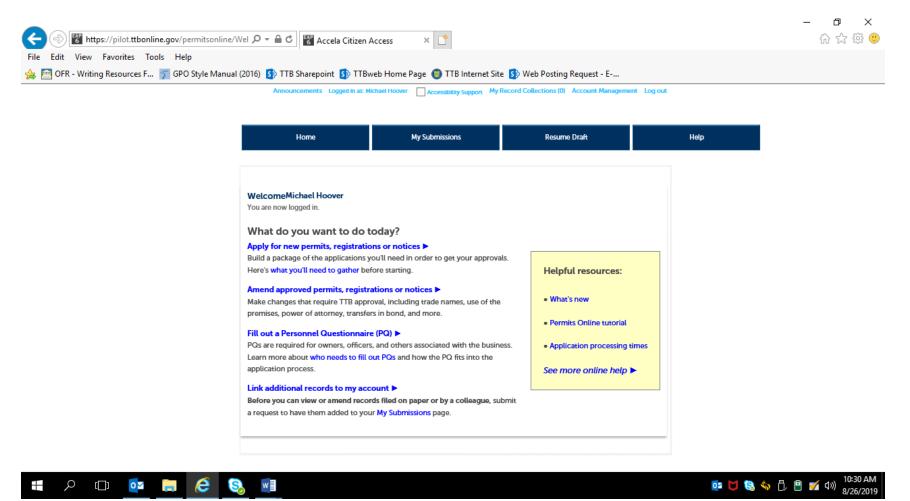
¹ When using PONL, entities that hold no TTB permits of any kind are required to complete an "Original Entity" application in addition to the Common Screens and the activity-specific application. Entities that already hold at least one TTB permit will not have to complete an Original Entity application.

Screens Common to All New Tobacco Industry Permit Applications:

PONL Log-in Screen — (https://www.ttbonline.gov/permitsonline/Default.aspx) —

(U.S. Department of the Treasury	F	Permits Online	
		Announcements Accessibility Support Register for an Acce	unt Log in	
	Home	My Submissions Resume Draft	Help	
	User Name or E-mail:	Password:	Log in »	
	Remember me on this computer	Ive torgotten my password New Users: Register for an Account		
		cure electronic system where you can apply for the permits, eed to start your business or amend your existing approvals.		
	New to Permits Online? - Get started by <u>viewing o</u> - See all <u>online help</u>	ur tutorial		
	 Please note that your account use the <u>live forgotten my pase</u> 	features are now available! Check out the video and links above to learn more. It will be locked after ten failed login attempts. If you do not know your password wind link above to automatically reset your password before you attempt a tent you will need to call TTB to have it unlocked.		
	strictly prohibited and subject to crir activity on the system and search an	of the United States Department of Treasury. Unauthortzed use of this sy ninal and clvfl penalties. The Department may monitor, record, and audit of retrieve any information stored within the system. By accessing and usit the terms of use, and are consenting to such monitoring, recording, and ment and other purposes.	any	

or submit an online inquiry



Clicking an option under the heading "What do you want to do today?" results in the Rules and Responsibilities page, which includes a Penalty of Perjury clause, as shown below. A new tobacco industry permit applicant will select the "Apply for new permits, registrations or notices" option.

Rules and Responsibilities page:



Home	My Submissions	Resu	me Draft	Help
Rules and Responsibilities				
Please read and accept the rules a	nd responsibilities.			
application, including accombest of my knowledge and b complete. The applicant mu	eclare that I have examined this panying statements, and to the elief, it is true, correct, and st immediately notify the TTB cation is filed of any change in	^		
	control of the applicant (in the			







The entire Rules and Responsibilities Statement reads as follows:

Under penalty of perjury, I declare that I have examined this application, including accompanying statements, and to the best of my knowledge and belief, it is true, correct, and complete. The applicant must immediately notify the TTB official with whom this application is filed of any change in ownership, management, or control of the applicant (in the case of a corporation, any change in the officers, directors, or persons holding 10 percent or more of the corporate stock). The business for which this application is made does not violate the law of the State in which the business will be conducted. In addition, if this application is approved, the applicant will conduct operations within a reasonable period of time and maintain such operations in conformity with Federal law.

I further declare:

That I have read the instructions for this form and that I understand that I may need to file additional documentation before TTB may act on this application;

That an appropriate TTB officer may require additional information to determine if I am entitled to the permit for which I am applying; That if any information provided on this application changes before I have received from TTB a final determination on this application, I must immediately notify the Director, National Revenue Center;

With respect to any water quality information furnished in connection with this application, that copies of this rider may be furnished to the applicable State Water Quality Agency and Regional Administrator, Environmental Protection Agency;

With respect to applications for Industrial Alcohol User Permits, I understand that any permit issued is subject to the following conditions: (1) that all employees conform to all of the laws of the United States relating to the manufacture, taxation, and control of and traffic in intoxicating liquors and all regulations pursuant to these laws, in force now or later while on the permit premises; (2) that I must pay the tax, with interest and penalties, on all alcohol diverted while being transported to me, and on all alcohol withdrawn, transported, used, or disposed of by me in violation of the laws and regulations, in force now or later; (3) that all persons interested in the business to be conducted under this permit are, under the laws and regulations, qualified to receive the privileges applied for, and (4) that specially denatured and tax-free spirits will be stored and secured in accordance with the requirements of 27CFR, Parts 20 and 22.

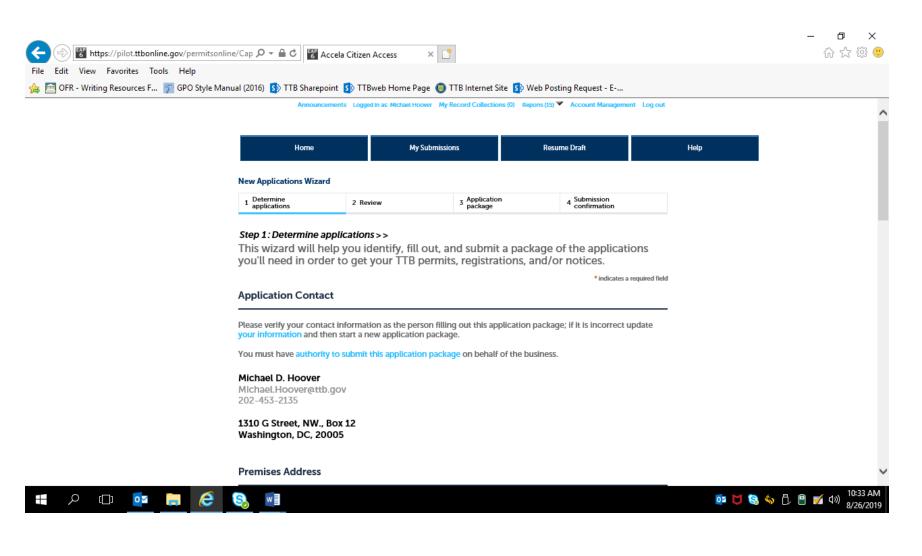
I understand that the information supplied by me in connection with this application will be used by TTB to make a determination on the application. Where such disclosure is not prohibited, TTB officers may disclose this information pursuant to the routine uses in TTB's System of Records Notice (SORN).

I understand that if I fail to supply the information requested TTB may delay or deny the issuance of the permit. I understand that TTB is asking for my Employer Identification Number and/or my Social Security Number for identification purposes. If I do not supply the numbers, I understand my application may be delayed.

After reading and accepting the rules and responsibilities, the applicant clicks "Continue," which leads to the New Applications Wizard, shown below:

(1) New Application Wizard, Determine Applications Screens:

Application Contact Information --



Premises Address Information --

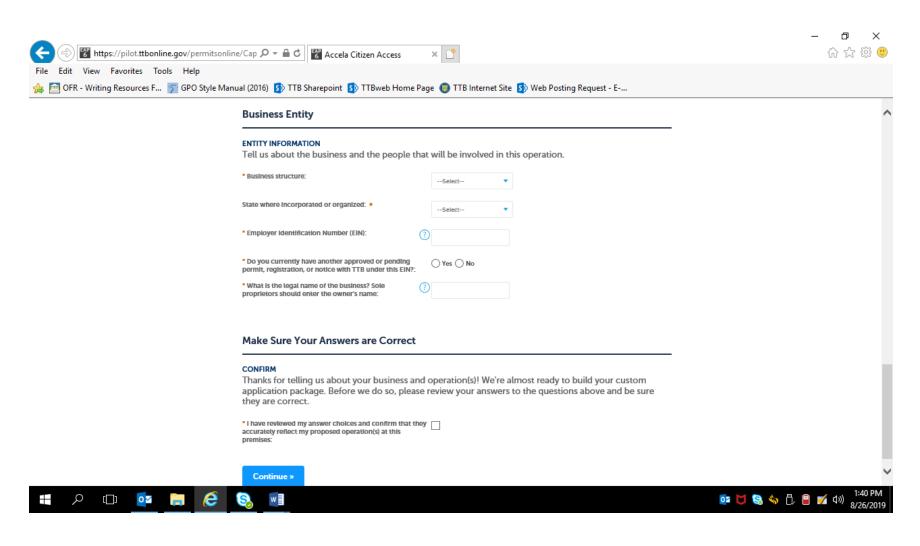
Please tell us the address of the physical location where the operation(s) will take place. Street # Fraction ? Direction ? Street Name ? Street Type Street Unit Type ? Unit ? Unit Type ? Unit ? Rural Address Line 1 ? Do not re-enter your Street Address Rural Address Line 2 ?	
Unit Type ? Unit ? Select▼ Number Select▼ Number Brural Address Line 1 ? Do not re-enter your Street Address	
Select Rural Address Line 1 Do not re-enter your Street Address	•
Rural Address Line 2 (?)	
Do not re-enter your Street Address	
City State ZIP Code County S▼	

Commodity Selection -

For new tobacco industry permit applications, the applicant selects "Tobacco" from the Commodity Selection drop-down menu, which brings up the appropriate tobacco industry permit application options under the heading "Select Application(s)," as shown below:

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		perations (e.g. brewing and distilling) as part of this application the same business and occur at the same premises location. Select Alcohol Toblacco Firearms and ammunition	^
	Select Application(s)		
	select all that are appropriate for this pren	e applications that best match your planned operations. Please nises location. ur operation, check our list of application types that are not	
		e instructions for mailing in your application types that are not	
	Manufacturer of Tobacco Products: *	<u>@</u> □	
	Importer of Tobacco Products/Processed Tobacco: *		
	Tobacco Export Warehouse: • Processed Tobacco Manufacturer: •		
	Business Entity		
	ENTITY INFORMATION Tell us about the business and the people	that will be involved in this operation.	,
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Business Entity Information -



Business Entity Information -

For "Business Structure," the applicant selected the appropriate response from the drop-down menu shown below. The Business Entity data fields following that selection do not change based on the selection.

Business Entity	
ENTITY INFORMATION Tell us about the business and the people that will be involved in this operation.	
Business structure:	
State where Incorporated or organized: Limited Partnership Partnership Sole Proprietorship Sole Proprietorship	
Employer Identification Number (EIN): O	
Do you currently have another approved or pending permit, registration, or notice with TTB under this EIN?: Ore Section 2.1 Sect	
* What is the legal name of the business? Sole proprietors should enter the owner's name:	
Make Sure Your Answers are Correct	
CONFIRM Thanks for telling us about your business and operation(s)! We're almost ready to build your custom application package. Before we do so, please review your answers to the questions above and be sure they are correct.	
I have reviewed my answer choices and confirm that they accurately reflect my proposed operation(s) at this premises:	

Answering "Yes" to "Do you currently have another approved or pending permit, registration, or notice with TTB under this EIN?" results in the data fields shown below --

ENTITY INFORMATION Tell us about the business and the people th • Business structure:	nat will be involved in this operation.	
 Business structure: 		
	Corporation 🔹	
State where Incorporated or organized: *	DC 🔹	
Employer Identification Number (EIN):	2 12-3456789	
Do you currently have another approved or pending permit, registration, or notice with TTB under this EIN?:	• Yes O No	
Do you have an approved signing authority or power of attorney on file with TTB for this EIN?:	f O Yes O No	
 Do you need to add or remove trade names (this does not include your operating / doing business as name)?: 	? Yes No	
Make Sure Your Answers are Correct		
	 Do you currently have another approved or pending permit, registration, or notice with TTB under this EIN?: Do you have an approved signing authority or power or attorney on file with TTB for this EIN?: Do you need to remove owners/officers, update Information about current owners/officers, update Information about current owners/officers, add or remove power of attorney, add or remove signing authority, and change the name of the business?: Any changes you make to the people involved in this business registrations, and notices you have on file with TTB for this EII Do you need to add a new owner, officer, or other person associated with this business?: Do you need to add or remove trade names (this does not include your operating / doing business as name)?: 	 Do you currently have another approved or pending permit, registration, or notice with TTB under this EIN?: Do you have an approved signing authority or power of attorney on file with TTB for this EIN?: Do you need to remove owners/officers, update for remove power of attorney, add or remove signing authority, and/or change the name of the business? Any changes you make to the people involved in this business as part of this application package will be applied (upon approval) to all other permits, registrations, and notices you have on file with TTB for this EIN - there is no need to file separate amendments. Do you need to add a new owner, officer, or other ? Yes No

Answering "No" to "Do you currently have another approved or pending permit, registration, or notice with TTB under this EIN?" results in the data fields shown below --

Business Entity	
ENTITY INFORMATION Tell us about the business and the people that will be involved in this operation.	
Business structure: Corporation	
State where Incorporated or organized: DC V	
Employer Identification Number (EIN): (2) 12-3456789	
Do you currently have another approved or pending permit, registration, or notice with TTB under this EIN?:	
What is the legal name of the business? Sole proprietors should enter the owner's name:	
As part of this process, we need some personal background information about owners, officers, and others associated with the business; this information is collected known the personal Quercheometer (PO)	
collected through the Personnel Questionnaires (PQ) (formerly called Colls). POS can be submitted separately from this application package, either by you, or by others using their own Permits Online accounts. Alternatively, you can complete the PQs for yourself and others while filling out the applications in your package. How will the PQs be submitted? :	
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NOTE: Personnel Questionnaires (TTB F 5000.9 and its PONL equivalent) are approved under OMB Control No. 1513-0002.)

The applicant then confirms the information provided in Step 1 -

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	Employer Identification Number (EIN):	12-3456789	^
	Do you currently have another approved or pending permit, registration, or notice with TTB under this EIN?	Ves () No	
	What is the legal name of the business? Sole proprietors should enter the owner's name:	(7) TTB, Inc.	
	Be sure you have the PQ tracking numbers (if you already hat * As part of this process, we need some personal background Information about owners, officers, and others associated with the business; this information is collected through the Personnel Questionnaires (PQ) (formerty catled OOIs). PGs can be submitted separately from this application package, either by you, or by others using their own Permits Online accounts. Alternatively, you can complete the PGs for yourself and others while filling out the applications in your package. How will the PGs be submitted? :	ve OOIs on file enter those instead). You will need to enter them later in the application pr	
	<	>	
	Make Sure Your Answers are Correct		
		nd operation(s)! We're almost ready to build your custom se review your answers to the questions above and be sure	
	ARE YOU SURE? You can't change your answers after leaving * I have reviewed my answer choices and confirm that t accurately reflect my proposed operation(s) at this premises:		
	Continue »		
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	Home	MyS	Submissions	Resume Draft	Help	^
	New Applications Wizard					
	1 Determine applications	2 Review	3 Application package	4 Submission confirmation		
	Step 2: Review					
	Continue »			Save and resume later		
	This is a summary of the information Editing Your A					
	Please review your answ					
	Please note that you will	not be able to edit the a		bage of the application wizard ade a mistake in the wizard, you will		
	New Applications Wizard					
	Application Contac	t				
	Michael D. Hoover 1310 G Street, NW., Box 12 Washington, DC, 20005 United States Primary Report202, 457, 2125					
	Primary Phone:202-453-2135 Email Address:Michael.Hoove					~
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Review screen continues:

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	1310 G ST NW Washington DC 20005		
	COMMODITY SELECTION Which commodity type do you need to apply for?:	Торассо	
	Select Application(s)		
	APPLICATION TYPES Manufacturer of Tobacco Products:	Yes	
	Importer of Tobacco Products/Processed Tobacco: Tobacco Export Warehouse:	No	
	Processed Tobacco Manufacturer:	No	
	Business Entity		
	ENTITY INFORMATION		
	Business structure:	Corporation	
	State where incorporated or organized:	DC	
	Employer Identification Number (EIN):	12-3456789	
	Do you currently have another approved or pending pern registration, or notice with TTB under this EIN?:	nit, No	
	What is the legal name of the business? Sole proprietors should enter the owner's name:	TTB, Inc.	
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The review screen continues:

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	Importer of Tobacco Products/Processed Tobacco:	No			
	Tobacco Export Warehouse:	No			^
	Processed Tobacco Manufacturer:	No			
	Business Entity				
	ENTITY INFORMATION				
	Business structure:	Corporation			
	State where Incorporated or organized:	DC			
	Employer Identification Number (EIN):	12-3456789			
	Do you currently have another approved or pending permit registration, or notice with TTB under this EIN?:	t, No			
	What is the legal name of the business? Sole proprietors should enter the owner's name:	TTB, Inc.			
	As part of this process, we need some personal background Information about owners, officers, and others associated with the business; this information is collected through the Personnel Questionnaires (PQ) (formerly called OOIs). Pos can be submitted separately from this application package, either by you, or by others using their own Permits Online accounts. Alternatively, you can complete the PQs for	ттв.	or are already on file with		
	yourself and others while filling out the applications in you package. How will the PQs be submitted? :	IF.			
	Make Sure Your Answers are Correct				
	CONFIRM				
	I have reviewed my answer choices and confirm that they accurately reflect my proposed operation(s) at this premises:	Yes			
	Continue »	I	Save and resume later		
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After confirming (or editing and confirming) the provided information, the applicant clicks "Continue," and is presented with the Application Package screen:

Step 3 – Application Package:

Home	My Submissions	Resume (Draft	Help	
New Applications Wizard					
1 Determine applications 2 Review	3 Application package	4 Pay cash bond if applicable	5 Submission confirmation		
Step 3: Application package					
Based on the information you have pro to begin each application.	vided, your application package c	consists of the application(s)	shown below. Select "Start"		
Once all applications are in "Ready button. After submitting the applic	to submit (edit)" status, you m ation package, you will no lor	ay select the "Submit ap iger be able to change ar	plication package" by of the information.		
Please complete the following application Application for Manufacturer of Processe			Start		
Application for Manufacturer of Tobacco	Products		Start		
Application for Original Entity			Start		
Application for Tobacco Export Warehou	se		Start		

Application Packages:

Step 1: Mailing Address Screens (These screens are the same for all new types of new tobacco industry permits) -

Note: Many data fields auto-fill based on information provided earlier.)

				15) 🔻 Account Manager			
Home	2	My Submissions	Ł	lesume Draft		Help	
Application for Man	afacturer of Tobacco	Products					
1 Mailing address	2 Operation description	3 Environmental & bond info.	4 Upload required documents	5 Declare & acknowledge	6 7		
Step 1: Mailing a	ddress > >			• Indianta	ind Gold		
Application Cor	ntact			 Indicates 	a required field		
		we have on file for you n if you're doing it on b			person		
If it is incorrect upd	ate your information	n and then start a new	application package.				
Michael D. Hoov Michael.Hoover∉ 202-453-2135							
1310 G Street, NV Washington, DC,							
Entity Informati							

Entity Information	
ENTITY INFORMATION This is the business information you provided earlier in the application process.	
Business Name: TESTING DO NOT APPROV	
EIN: () 12-3456789	
PERMIT INFORMATION	
Permit Number:	
Premises Address	
This section pertains to the physical location where your approved operations will take place.	
Street # Fraction (?) Direction (?)* Street Name (?) Street Type Street Type 1310 Select ▼ G ST Street Name (?)	
Unit Type (?) Select V Unit (?) Number	
Rural Address Line 1 (?)	

PERMIT INFORMATION	
Permit Number:	
Premises Address	
This section pertains to the physical location where your approved operations will take place.	
Street # Fraction (2) Direction (2)* Street Name (2) Street Type Street (2) 1310 Select- * a ST NW	
Unit Type (?) Safact Unit (?) Number	
Rural Address Line 1 (?) Da not ru-einter your Streat Address	
Rural Address Line 2 () Da nat re-entar your Streat Address	
• City • State • ZIP Code County Washington DC * 20005	
Mailing Address	
Please provide the address where mail regarding this operation should be sent.	

For "Mailing Address," the applicant may select Auto Fill or New. If Auto Select is chosen, the mailing address information will auto fill from the contact information provided earlier. If "New" is selected, the data fields shown below appear:

Contact Information (Mailing Address) data fields, if "New" Mailing Address is chosen, as shown above.

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1310 G Street, N Washington, DC,		
Contact Information	×	
Business Mailing Name:		
First Name: (7) Middle Nam	e: • Last Name:	
Address (Legal Residence): *		
P.O. Box *		
* City: * State: (Sated:	7 ZIP Code	
Country:		
United States Primary Phone: Alternate P	v one: Fax:	
Email Address. 🕜		
Continue Clear Disc	rd Changes	
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After mailing address information is provided:

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	Premises Address	~
	This section pertains to the physical location where your approved operations will take place.	
	Street # Fraction () Direction () Street Name () Street Type 1310 Select	
	Unit Type () Select v	
	Rural Address Line 1 () Da nat re-enter your Streat Address	
	Rural Address Line 2 () Do not n=enter your Street Address	
	City •State •ZIP Code County Washington DC * 20005	
	Mailing Address	
	Please provide the address where mail regarding this operation should be sent.	
	Contact added successfully. Michael D. Hoover Michael Hoovergattb.gov 202-453-2135	
	1310 G Street, NW., Box 12 Washington, DC, 20005	
	Continue » * Back to Application Package Save and resume later	~
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After clicking continue, screens will vary depending on the type of tobacco permit being applied for.

Application for Original Entity:

The information in Step 1 auto-fills based on the information provided on the Common Screens (except Business Website) -

Ann	nouncements Logged in as: Mi	ichael Hoover My Record Co	ollections (0) Reports (15)	 Account Manageme 	nt Log out		
Hom	ne	My Submissions	Resu	ıme Draft		Help	
Application for Orig		3 Upload required	₄ Declare &				
1 View contact information	2 Key personnel & trade names	3 Optoad required documents	4 acknowledge	5 Review	6		
About the Entity All of your business information, officer you apply for under	ntact information >> r Record ss information is found in ers, powers of attorney, s er this EIN will be associa have its own Entity reco	n your Entity record. Th signing authorities, and ated with this Entity rec rd. Entity Record	d trade names. Each p cord. If you submit ap	permit, registration,	or notice		
About the Entity All of your business information, officer you apply for under	r Record ss information is found in ers, powers of attorney, s er this EIN will be associa	n your Entity record. Th signing authorities, and ated with this Entity rec ord.	d trade names. Each p cord. If you submit ap	permit, registration,	or notice		
About the Entity All of your business information, officer you apply for under	r Record ss information is found in ers, powers of attorney, s er this EIN will be associa	n your Entity record. Th signing authorities, and ated with this Entity rec rd. Entity Record Our Business, Inc	d trade names. Each p cord. If you submit ap	permit, registration,	or notice		
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Please verify your contact information as your information and then start a new app		tion package; if it is incorrect update	
Michael D. Hoover Michael.Hoover@ttb.gov 202-453-2135			
1310 G Street, NW., Box 12 Washington, DC, 20005			
Business Entity			
ENTITY INFORMATION This is the business information you pr website, you may provide it here.	ovided earlier in the application	n process. If your business has a	
 Business name: 	TTB, Inc.		
* Employer Identification Number (EIN):	12-3456789		
Organization type:	Corporation 💌		
State where incorporated or organized:	DC 👻		
Business website:			
Continue » « Back to Application Packa	je	Save and resume later	

Application for Original Entity							
		3 Upload required documents	4 Declare & acknowledge	5 Review		6	
Step 2: Key personnel & the Please make sure to add yours Attorney table.			oplication, to either the	Signing Author	ity or Pov	wer of	
Step 2a				* indic	ates a requi	ired field	
OFFICER/OWNERSHIP INFORM Select "Add a Row" to identi member, managing membe You must also add a row for	tify each partne er, or sole prop	prietor.				er,	
business. Finally, you must also add a	a row for every	company or t	ust holding ownershi	in the busine	SS.		
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			Personnel Employer	[mail	т	7a1-	
Date (for TTB use Officer/Owner Classification Ques	w are you omitting Personnel estionnaire ormation?	Middle Last Name Name	Questionnaire Identificatior Tracking Number Number (EIN)	Suffix Ernail Address	Title if C		
Date (for TTB use Officer/Owner Classification Ques	estionnaire First Name		Questionnaire Identification Tracking Number	Suffix Ernau Address		F	

Officer / Ownership Information sub-screen:

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Select "Add a Row" manager, member,	to identify each partner, general/limited managing member, or sole proprietor.	I partner, officer, director, trustee,	
You must also add the business.	a row for every stockholder or interest h	older with a stake of 10% or more in	
Finally, you must al	so add a row for every company or trust	holding ownership in the business.	
Removal Date (for TTB use only):	Officer/Owner Classification: Select	How are you submitting the (?) Personnel Questionnaire Information?:	
		Select	
First Name:	Middle Name:	Last Name:	
Personnel Questionnaire	Employer Identification Number (EIN):	Suffix:	
Tracking Number:		Select 🔻	
Email Address:	Title:	Title if Other:	
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List additional titles (if any):	Company Name:	Trust Name: (?)	
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Percentage of Voting	- Dollar amount invested in Business to date:	Financial Institution: Name, City (7)	
Stock Interest:	Louis amount invested in pusifiess to date.	Financial Institution: Name, City (?) and State:	
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List additional titles (if any):	Company Name:	Trust Name: 🕜	
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Percentage of Voting- Stock Interest:	Dollar amount invested in Business to date:	Financial Institution: Name, City (?) and State:	
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NOTE: Signing Authority information collection approved under OMB No. 1513–0036, and Power of Attorney information collection approved OMB No. 1513–0014.

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Trade Names sub-screen:

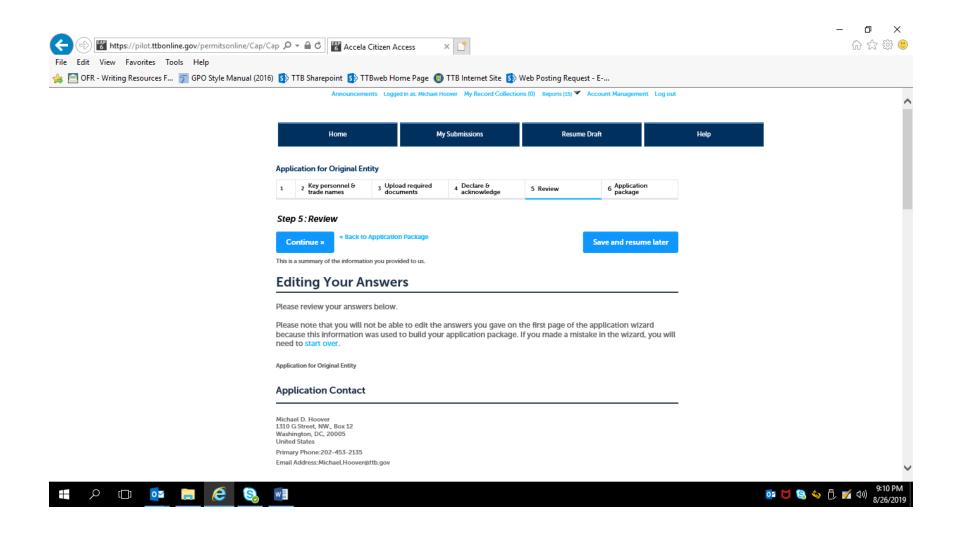
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	Declaration			indicates a required fiel	la	
	DECLARE AND ACKNOWLEDGE By checking the box below, you de including accompanying statement and belief.					
	You may not commence or engage approval from the Director of the N		by this application	until you have received		
	I declare under penalties of perjury under the United States of America, that I have examine application, including accompanying stateme best of my knowledge and bellef, it is true, co compilete*	d this ents, and to the				
	Declaration Date: *					
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Review of Original Entity Application —



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-	Required Documents				
Upload attachments button.	here. Be sure to save all upload	s before leaving thi	s page using th	e 'Save Attachments'	
View, download, or	print attachments by selecting th	ne document name			
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Files can be up to 16 M PDF file type is preferr	IB in size. Larger documents should ed.	be separated and up	oaded as multip	le files if necessary.	
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DECLARE AND ACKNOW					
United States of Americ application, including a	s of perjury under the laws of the γ_c a, that I have examined this ccompanying statements, and to the nd belief, it is true, correct, and	25			
Declaration Date:	08	8/26/2019			
Continue »	Back to Application Package			Save and resume later	

After review, the applicant is returned to the Step 3, Application Package, of the Common Screens. If only one type of permit is applied for, the applicant is taken to the Step 5, Submission Confirmation, screen.

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Screens for <u>New Tobacco Importer</u> Permit:

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							Michael D. Hoover Michael.Hoover@t 202-453-2135							
							1310 G Street, NW Washington, DC, 2							
							Entity Informatio	'n						
							ENTITY INFORMATION This is the business	information you p	rovided earlier in the	application process.				
							Business Name:		TESTING DO NO	T APPRO\				~
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EIN:		PPROV	
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	<u> </u>	Street Type Street ?	
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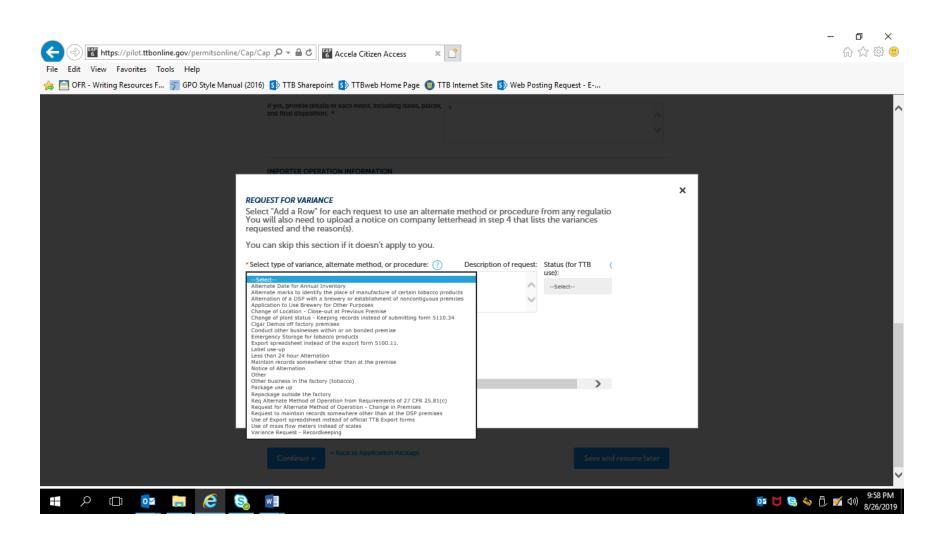
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	REASON FOR THE APPLI	ICATION					
	New Importer of tobacco tobacco: *	products / processed	?⊻				
	OWNER BACKGROUND	INFORMATION					
	Has any Investor who has percent of the funds of the more than ten percent of Interest holder who holds holding of a limited liabilit any officer, director, partm	e business, stockholder the issued stock of a cor more than ten percent i ty company, sole proprie	who holds O O O O O O O O O O O O O O O O O O O				
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	OWNER BACKGROUND INFORMATION		~
	Has any investor who has or will contribute more than ten percent of the funds of the business, stockholder who holds more than ten percent of the issued stock of a corporation, interest holder who holds more than ten percent interest holding of a limited liability company, sole proprietor, or any officer, director, partner, member, manager, or person of primary interest in the business ever been subject to or are currently subject to legal proceedings involving a felony violation of any provision of Federal criminal taw relating to tobacco products, processed tobacco, cigarette tubes?.		
	If yes, please provide details of each event, including dates x and reasons: •	$\hat{}$	
	Has any Investor who has or will contribute more than ten percent of the funds of the business, stockholder who holds more than ten percent of the issued stock of a corporation, interest holder who holds more than ten percent interest holding of a limited liability company, sole proprietor, or any officer, director, partner, member, manager, or person of primary interest in the business ever been convicted of a felony violation of any provision of Federal or State criminal law relating to tobacco, products, processed tobacco, cigarette paper, or cigarette tubes?: *		
	If yes, provide details of each event, including dates, places, x and final disposition: •	Ŷ	
	IMPORTER OPERATION INFORMATION Select your proposed operation(s).		
	Importer of Tobacco Products: • (2)		
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If yes, provide details of each event, including dates, places, x and final disposition: •	\sim
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Step 2b	
REQUEST FOR VARIANCE Select "Add a Row" for each request to use an alternate method or procedure from any regulations. Y will also need to upload a notice on company letterhead in step 4 that lists the variances requested at the reason(s).	
You can skip this section if it doesn't apply to you.	
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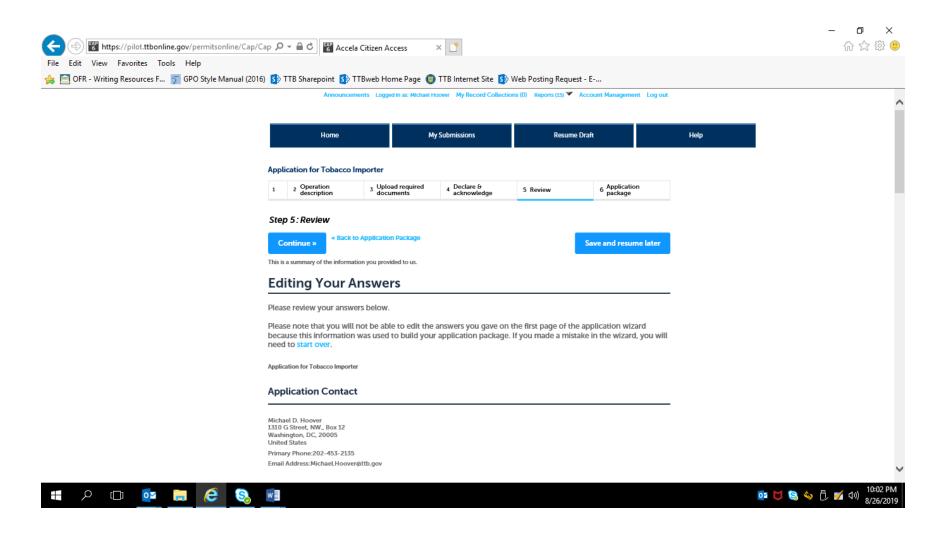
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Announcements Logger	ed in as: Michael Hoover My Record Collect	.tions (0) Reports (15) 🔻 Ar	acount Management Log out		
Home	My Submissions	Resume Dr	Draft	Help	
Application for Tobacco Importer					
1 2 Operation description 3 Uploa docum	ad required 4 Declare & acknowledge	5 Review	6 Application package		
Step 4: Declare & acknowledg	je>>		 indicates a required field 		
Declaration					
DECLARE AND ACKNOWLEDGE By checking the box below, you o including accompanying stateme and belief.					
You may not commence or engage approval from the Director of the		by this application un	ntil you have received		
I declare under penalties of perjury under tr United States of America, that I have exami application, including accompanying state best of my knowledge and bellef, it is true, complete *	mined this tements, and to the				
Declaration Date: •					

Step 5: Review -



Review continues to the bottom of the Review Screen; the applicant may edit the displayed information. Once reviewed, the applicant clicks "Continue."

Step 3b: Upload Required Documents Upload attachments here. Be sure to save all uploads before leaving this page using the 'Save Attachments' button. View, download, or print attachments by selecting the document name. Attachment List Files can be up to 16 MB in size. Larger documents should be separated and uploaded as multiple files if necessary. PDF file type is preferred. Name Document Type Size Date Action	^
Upload attachments here. Be sure to save all uploads before leaving this page using the 'Save Attachments' button. View, download, or print attachments by selecting the document name. Attachment List Files can be up to 16 MB in size. Larger documents should be separated and uploaded as multiple files if necessary. PDF file type is preferred.	
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Files can be up to 16 MB in size. Larger documents should be separated and uploaded as multiple files if necessary. PDF file type is preferred.	
PDF file type is preferred.	
Name Document Type Size Date Action	
No records found.	
Add Declaration	
DECLARE AND ACKNOWLEDGE	
I declare under penalties of perjury under the laws of the Yes United States of America, that I have examined this application, including accompanying statements, and to the best of my knowledge and belief, it is true, correct, and complete.	
Declaration Date: 08/26/2019	
Continue » Save and resume later	

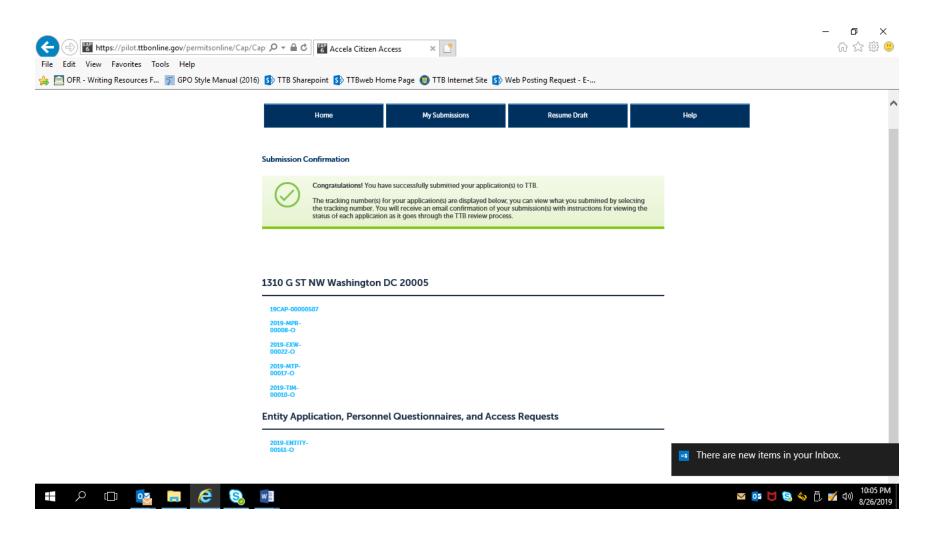
After review, the applicant is presented with the Submit Application screen; see below -

Submit Application Package screen:

Home		My Submissions	Resume D	raft	Help	
New Applications Wiz	zard					
1 Determine applications	2 Review	3 Application package	4 Pay cash bond if applicable	5 Submission confirmation		
Step 3: Applicatio	on package					
Based on the information to begin each application		l, your application package c	onsists of the application(s)	shown below. Select "Start"		
Once all applications button. After submit	s are in "Ready to su ting the application	ubmit (edit)" status, you m n package, you will no lon	ay select the "Submit app ager be able to change an	lication package" y of the information.		
Please complete the follo Application for Manufact		ассо				
Ready to submit (edit Application for Manufact		JCts 12-3456789 / TTB, Inc.				
Application for Original E	Entity 12-3456789 / TT	B, Inc.				
Ready to submit (edit Application for Tobacco I		3456789 / TTB, Inc.				
Application for Tobacco	Importer 12-3456789	/ TTB, Inc.				
Appleation for foraceo						

After submitting the application(s) package, the applicant receives a Submission Confirmation from the PONL system.

Submission Confirmation Screen:



— END —