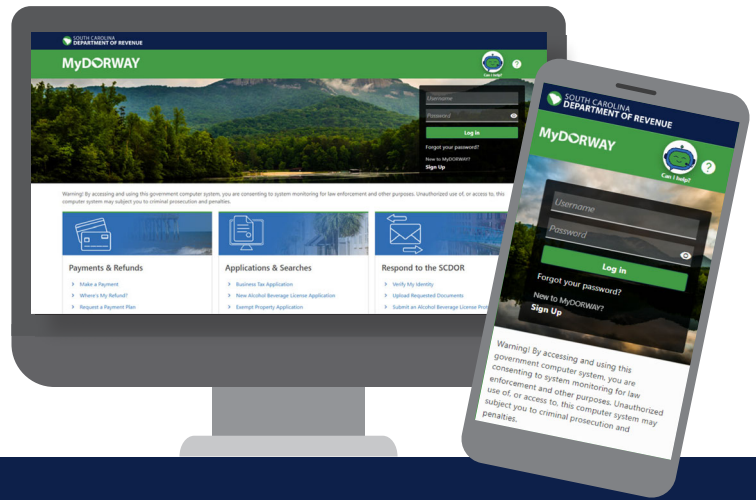


Application for Registration of Liquor Producer or Importer

APPLY FOR YOUR LIQUOR PRODUCER OR IMPORTER AND CONTRACTING LIQUOR PRODUCER LICENSES ON MyDORWAY!

- It's faster and easier than completing a paper application and results in fewer errors.
- Many supplemental forms are included in the MyDORWAY application workflow.
- Register your brands at productregistrationonline.com



Manage your tax accounts online for FREE!

MyDORWAY

Fast. Easy. Secure.

One-stop shop!

Manage your SCDOR accounts all in one place

- Review your payment history
- Immediate access to correspondence
- Easily update your account information

+ more!

Why MyDORWAY?

- Access your account 24/7
- Make ACH debit or credit card payments, **with no convenience fees**
- Receive immediate confirmation for transactions
- Reduce errors with automatic calculations
- Control who has access to your SCDOR accounts
- Always know you're using the most up-to-date forms

Ready to sign up for MyDORWAY?

Visit MyDORWAY.dor.sc.gov to get started.

You'll need your FEIN or SSN, License Number, and a Letter ID or copy of your last return.

Tutorials are available at dor.sc.gov/MyDORWAY

Want more information about Alcohol Beverage Licensing? Visit dor.sc.gov/abl



Save time and paper! The fastest, easiest way to submit the ABL-107 and the ABL-107B is by using our free online tax portal, MyDORWAY, available at **MyDORWAY.dor.sc.gov**. You must have a MyDORWAY account before applying for these licenses. To apply on MyDORWAY, start by logging in, then click the **More** tab. On the next screen, select **Apply for a New Alcohol Beverage License**.

To be eligible for a new Alcohol License, you must meet the applicable requirement:

- **Sole Proprietorship:** You must have been a resident of South Carolina for at least 30 days.
- **General Partnership:** The Partnership must have been formed in South Carolina for at least 30 days.
- **Corporation, Limited Liability Corporations (LLCs), and Limited Liability Partnerships (LLPs):** The entity must have been registered with the South Carolina Secretary of State's (SCSOS) office for at least 30 days.

Submit all of the following documents that apply:

ABL-107 CHECKLIST:

- 1. Completed application, signed and dated
- 2. Completed ABL-946 for each principal
- 3. Completed ABL-920
- 4. Criminal record check (CRC) for all principals that is less than 90 days old.
 - If the principal is not an SC resident, the statewide CRC must be submitted from the current state of residency.
 - If the principal has lived in SC for less than two years, the statewide CRC must be submitted from the previous state of residency and from SLED at **www.sled.sc.gov**.
 - If the principal has lived in SC for two years or more, submit the statewide CRC from SLED at **www.sled.sc.gov**.
 - Attach a disposition for any charge that does not list the court charges determination.
- 5. Certificate of Authority to do Business in South Carolina issued from the SCSOS, if applying as a foreign corporation
- 6. Copy of Basic Permit issued by the Alcohol and Tobacco Tax and Trade Bureau (TTB)

LLCs, LLPs, and General Partnerships are required to submit:

- LLC Operating Agreement, Partnership Agreement, or the ABL-919

ABL- 107B CHECKLIST:

All liquor representatives must be South Carolina residents for at least 30 days prior to applying.

- 1. Completed application, signed and dated
- 2. Completed ABL-920
- 3. Completed ABL-946 for each SC Representative
- 4. Criminal record check (CRC) that is less than 90 days old.
 - If the SC Representative has lived in SC for two years or more, submit the statewide CRC from SLED at **www.sled.sc.gov**.
 - If the SC Representative has lived in SC for less than two years, the statewide CRC must be submitted from the previous state of residency and from SLED at **www.sled.sc.gov**.
 - Attach a disposition for any charge that does not list the court charges determination.

Social Security Privacy Act Disclosure

It is mandatory that you provide your Social Security Number on this tax form if you are an individual taxpayer. 42 U.S.C. 405(c)(2)(C)(i) permits a state to use an individual's Social Security Number as means of identification in administration of any tax. SC Regulation 117-201 mandates that any person required to make a return to the SCDOR must provide identifying numbers, as prescribed, for securing proper identification. Your Social Security Number is used for identification purposes.



STATE OF SOUTH CAROLINA
DEPARTMENT OF REVENUE
APPLICATION FOR REGISTRATION OF
LIQUOR PRODUCER OR IMPORTER

The fastest, easiest way to submit the ABL-107 is by using our free online tax portal, MyDORWAY, available at MyDORWAY.dor.sc.gov.

File Number: _____

Mail to: SCDOR, ABL Section, PO Box 125, Columbia, SC 29214-0907
Email: ABL@dor.sc.gov

License Fee: \$400 biennially
Expires: August 31 of even numbered years

PRINT ALL INFORMATION
1. Legal entity name or sole proprietor
2. Physical location of business (no PO box)
3. Mailing address
4. Type of ownership
5. Trade name (doing business as)
6. Business phone number
7. FEIN/SSN
8. Email
9. Does the applicant own or have a financial interest in a liquor wholesaler/distributor or retail business in South Carolina?
10. Does your TTB permit indicate that you are a wholesaler/distributor?
If yes, submit a letter indicating you are the primary American source or American producer.

DESIGNATED AGENT

You must designate a person to receive all notices from the SCDOR concerning your license and/or permit. These notices will be sent to the person at the mailing address provided in section 3. It is your responsibility to keep the SCDOR informed of any change to your designated agent or mailing address, as the law will presume you received all notices sent to the address you have given us.

Name of designated agent or compliance agent

Compliance agency name, if applicable

The SCDOR will process your application within 6-8 weeks. This process will be delayed if the SCDOR denies your application. All applications that are denied or have been protested are subject to a hearing with the Administrative Law Court.

I certify that this business meets the legal requirements under South Carolina law for the license and/or permit type for which this application is being filed. For a general summary of the qualifications and legal requirements for beer, wine, and liquor permits and licenses, see the ABL-975. Beer, wine, and liquor are governed by SC Code of Laws Title 61, Chapters 2, 4, and 6; Title 12, Chapters 21 and 33; Title 63, Chapters 7, 13, 15, and 19; and Title 33 Chapter 42. Regulations are found in Chapter 7 of the Code of Regulations. Full code sections are available at dor.sc.gov/policy.

I understand that a misstatement or concealment of fact in an application is sufficient grounds for the revocation of the license and/or permit. Under penalties of perjury, I declare that I have read and understood this form and the information I have provided herein is true, correct, and complete.

Principal's Signature

Date



APPLICATION FOR LIQUOR BRAND REGISTRATION

Mail to: SCDOR, ABL Section, PO Box 125, Columbia, SC 29214-0907

Email: ABL@dor.sc.gov

Alcohol Beverage License number _____ Registered producer/importer name _____

Contact Person _____ Phone _____ Email _____

Home Address (no PO box) _____
Street

City _____ State _____ ZIP _____

INSTRUCTIONS:

- List all labels and/or brands you intend to ship and the wholesalers/distributors you ship to. If you need additional space, submit additional copies of the ABL-107A.
- Attach a copy of the Certificate of Label Approval (COLA) from the Tax and Trade Bureau (TTB) for each label and/or brand listed.
- You may only ship to the licensed South Carolina wholesalers/distributors listed.
- Provide a Letter of Authority from the product owner giving you authority to register their product.
- There is no charge for the first five registered labels and/or brands.
 - If you have previously registered five labels and/or brands, you will need to pay \$20 per label and/or brand.
 - If you are submitting multiple COLAs for various sizes of the same brand and/or label, only one \$20 payment is required.

Label and/or Brand Name (list full name)	ABV%	Size	Wholesalers/Distributors



APPLICATION FOR LIQUOR REPRESENTATIVE

The fastest, easiest way to submit the ABL-107B is by using our free online tax portal, MyDORWAY, available at **MyDORWAY.dor.sc.gov**.

File number: _____

Mail to: SCDOR, ABL Section, PO Box 125, Columbia, SC 29214-0907

Email: ABL@dor.sc.gov

License Fee: \$250 biennially

Expires: August 31 of even numbered years

Registered producer/importer name _____

Physical address (no PO Box) _____
Street

City State ZIP

Mailing address _____
Street

City State ZIP

Registered producer/importer's South Carolina representative

All liquor representatives must be South Carolina residents for at least 30 days prior to applying. For more information, see Title 61, Chapter 6, Article 7 of the SC Code of Laws, available at **dor.sc.gov/policy**.

1. Name of representative _____

2. Location address where the product will be received (no PO Box) _____
Street

City County State ZIP

3. Do you own or have a financial interest in a liquor wholesale/distributor or retail business in SC? Yes No

If yes, explain _____

4. Business phone number _____

I do hereby certify that the SCDOR shall have the right within statutory limitations to audit and examine the books, records, and papers of the applicant to enforce laws administered by the SCDOR and SLED.

I certify that this business meets the legal requirements under South Carolina law for the license and/or permit type for which this application is being filed. I understand that a misstatement or concealment of fact in an application is sufficient grounds for the revocation of the license and/or permit. Under penalties of perjury, I declare that I have read and understood this form and the information I have provided herein is true, correct, and complete.

Representative's Signature

Date



Mail to: SCDOR, ABL Section, PO Box 125, Columbia, SC 29214-0907

Email: ABL@dor.sc.gov

This form is required by SC Code Section 8-29-10 and Title 61. See the full code section at dor.sc.gov/policy.

I, _____ of _____ ,
Print clearly first, middle, and last name Home address (no PO box)
 _____ ,
City State ZIP

being first duly sworn, deposes and state the following:

Name change/alias: Yes No

If yes, list: _____

Check ONLY one box.

1. I am a **United States Citizen**.

2. I am a **Legal Permanent Resident**.

3. I am a **Qualified Alien** under the Federal Immigration and Nationality Act, Public Law 82-44.

4. I am a **Foreign Citizen**, and resident of _____
Country of residency
 and reside at _____ , _____
Home address (no PO box) City, State, and ZIP

5. Other (**Explain**): _____

Date of birth (mm/dd/yyyy)

Alien Registration number

YOU MUST ATTACH A COPY OF ALL IMMIGRATION DOCUMENTS

This affirmation must be completed by all applicants or the application will be denied. This affirmation will also apply during any renewal. Any change in immigration or citizenship status must immediately be reported to the SCDOR. Willfully making a false statement on this affirmation is a felony, punishable by fines and/or imprisonment.

Under penalty of perjury and recognizing that I am subject to the criminal and civil penalties imposed by Title 12 of the South Carolina Code of Laws, I declare that I have examined this affirmation and to the best of my knowledge and belief, it is true, correct, and complete.

I understand that a misstatement or concealment of fact in an application is sufficient grounds for the revocation of the license and/or permit. Under penalties of perjury, I declare that I have read and understood this form and the information I have provided herein is true, correct, and complete.

 Principal's Signature

 Date



If you're applying on MyDORWAY, the ABL-946 is part of the normal application workflow. You do not need to submit or attach a paper copy of the ABL-946 if applying on MyDORWAY.

Mail to: SCDOR, ABL Section, PO Box 125, Columbia, SC 29214-0907

Email: ABL@dor.sc.gov

What you need to know:

- The SCDOR cannot issue a license or permit to anyone who owes delinquent taxes, penalties, or interest.
- You are waiving your rights under SC Code Title 30, Chapter 2 and SC Code Section 12-54-240. Full code sections are available at dor.sc.gov/policy.
- The SCDOR has the right to share information with other principals or applicants in order to process the application or renewal.

Legal entity name _____ FEIN _____

Principal's name _____

Home address (no PO box) _____ Street _____

City _____ State _____ ZIP _____

Date of SC residency (mm/dd/yyyy) _____ Date of birth (mm/dd/yyyy) _____

SSN _____ FEIN _____ Percent of ownership _____

Principal types (Check one):

- Owner
 Corporate officer
 Partner
 Member (LLC)
 Manager (LLC)
 Employee/Manager
 Nonprofit officer
 Fiduciary
 Publicly traded agent

Have you as an individual, or as an organization in which you were a principal, had any license to sell beer, wine, or liquor revoked or suspended in this state or any other state?

Yes No **If yes, you must attach an explanation.**

Have you been convicted of a crime in South Carolina or any other state?

Yes No **If yes, you must attach an explanation.**

I understand that a misstatement or concealment of fact in an application is sufficient grounds for the revocation of the license and/or permit. Under penalties of perjury, I declare that I have read and understood this form and the information I have provided herein is true, correct, and complete.

Principal's Signature

Date

Social Security Privacy Act Disclosure

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