

CITY OF UNALASKA
Office of the City Clerk
PO Box 610, Unalaska, AK 99685
Phone (907) 581-1251 Fax (907) 581-1417 Email: emagdaong@ci.unalaska.ak.us

TOBACCO DISTRIBUTOR REGISTRATION FORM

City of Unalaska Use Only

Tobacco Tax Account No:

Date:

Initials

Business Identification

Business Name

DBA

State of AK Business License #

City of Unalaska Business License #

Tobacco Excise Tax Contact Information

Contact Name

Title

Mailing Address

City

State

Zip

Phone Number

Email Address

Please list each location in Unalaska from which Tobacco Products will be sold

Physical Location #1:

Physical Location #2:

Physical Location #3:

Physical Location #4:

Physical Location #5:

Please check each type of tobacco products that will be sold

Cigarettes ()

E-Cigarettes (or similar devices) ()

Cigars ()

Chewing Tobacco / Snuff ()

Others () Please specify

Under penalty of unsworn falsification, I attest that to the best of my knowledge that the information provided on this application is true and correct.

Printed Name

Title

Signature

Date