



Read this information first

File this application if you have been issued a nonbeverage user's license and want to purchase alcoholic liquors from a manufacturer or an importing distributor without paying the Illinois Liquor Tax.

Your application must be made out for the exact quantity of alcoholic liquor you intend to purchase.

All permits are subject to the rules and regulations issued by the Illinois Liquor Control Commission and the Illinois Department of Revenue under authority contained in the Liquor Control Act of 1934.

If you have questions, call us weekdays at 217 782-6045.

Mail your completed application to: EXCISE TAXES DIVISION ILLINOIS DEPARTMENT OF REVENUE PO BOX 19039 SPRINGFIELD IL 62794-9039

Permit no.: \_\_\_\_\_ Date issued: \_\_\_/\_\_\_/\_\_\_

Step 1: Identify your business

Name \_\_\_\_\_ Nonbeverage user license number \_\_\_\_\_ Address \_\_\_\_\_ FEIN or FTIN \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ ZIP \_\_\_\_\_

Step 2: Complete the following statement

I, \_\_\_\_\_, state that I am the \_\_\_\_\_ of the business applying for a permit to purchase \_\_\_\_\_ wine gallons of alcoholic liquor of the following classification: \_\_\_\_\_ cider \_\_\_\_\_ beer \_\_\_\_\_ wine \_\_\_\_\_ spirits without paying the Illinois Liquor Tax. I have complete knowledge of the use to which the alcoholic liquor will be put, and I am authorized to make these statements for the purpose of receiving permission to purchase alcoholic liquors from a manufacturer or an importing distributor who is not liable for paying the tax imposed by the Liquor Control Act of 1934 with respect to this sale. I also certify that the alcoholic liquors that will be purchased with this permit are exclusively for use in \_\_\_\_\_; that when they are used, they will be rendered unfit for beverage purposes; and that none of the alcoholic liquors will be sold or otherwise disposed of in the same condition as received.

Step 3: Sign below

Under penalties of perjury, I state that I have examined this application and, to the best of my knowledge, it is true, correct, and complete.

Signature \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

This form is authorized by the Liquor Control Act of 1934. Disclosure of this information is REQUIRED. Failure to provide information could result in denial of this application. This form has been approved by the Forms Management Center. IL-492-1487 RL-4 (R-04/10)

