

## ROGER A. CORLETT, CPA

## **Ashtabula County Auditor**

25 West Jefferson Street
Jefferson, Ohio 44047-1092
Phone: 440-576-3783 ~ Fax: 440-576-3797
auditor@ashtabulacountyauditor.org

## **CIGARETTE LICENSE**

The 2018-2019 Cigarette Licenses for Ashtabula County are due by May 29, 2018.

The fee for a Retail Cigarette Dealer's License is \$125.00 per physical location. Please make your check or money order payable to **Dawn Cragon**, **Treasurer**.

Enclosed is an application which has been filled in with our most current information. <u>Please make corrections</u> so that we may keep our records current. If you no longer sell cigarettes or have sold your business, please <u>notify this office</u> by returning this letter in the envelope provided or by telephone 440-576-3786 or e-mail: <u>clanchor@ashtabulacounty.us</u>

Office hours for Cigarette License Sales are Tuesday, Wednesday, and Thursday 9:00 - Noon

Sincerely,

Roger A. Corlett, CPA
Ashtabula County Auditor

Roger a. Corbet, EPA



Application for Retail Cigarette Dealer's License (Please mail two copies to the office of the county auditor.)

For the	ne period from	20	to	:	20	
To the auditor of		County	Date			
Taxing district			_ Fee			
Pursuant to R.C. 5743 specified below and h			•	-	for each place of bus of business.	iness
name and Ohio co	nt individual's full n orporation charter r		rporation, give		poration, print corpora ssued by secretary of	
2. Check whether do		Corporation  Fid	uciary	sociation LLC	LLP Other	
3. List below the title	es, names and add	ress of all corporate of	officers, assoc	iation officers or part	ners	
Title	Name	Street		City	State ZIP	
Title	Name	Street		City	State ZIP	
4. Trade name (if ot	her than above)					
5. Sales tax vendor	license number (re	equired)				
6. Federal employer identification number or, if none assigned for reporting federal taxes, please enter your Social Security number			FEIN	FEIN Social Security number		
•	•	ust be paid for <u>each</u> l	ousiness locat	ion listed)		
Street	City	State	ZIP	License no. License f (Filled in by county) Circled in by co		
Street	City	State itional places to be listed on se	ZIP	License no. (Filled in by county)	License fee (Filled in by county)	
8. E-mail address —	(,					
9. Residence addres	ss of dealer or hom	ne office of corporatio	n			
Street	eet City			State	ZIP	
I declare under penals and belief is a true, co			have been ex	amined by me and to	o the best of my know	ledge
Signature of dealer or officer of company				Telephone number		

All questions on this application should be fully answered before the licenses requested hereon are issued. For further license information, see reverse side of this form.

## **License Information**

A cigarette dealer's license does not authorize the licensee to engage in the business of trafficking in cigarettes at any place of business in this state other than that specified thereon by the county auditor.

There is no discount for multiple locations.

In the event that a business is moved from one location to another within the same county, the holder of the retail license may transfer the license for a fee of \$5. In the event that a business is sold, or an individual or partnership incorporates his or their business, or a partnership or corporation is dissolved, the cigarette license that has been issued to a dealer prior to the occurrence of any such event may not be used, and a new license must be obtained.

**Important Notice:** Ohio recently passed legislation that prohibits the sale of cigarettes in Ohio that have not been approved by the attorney general's office. A list of brands legal for sale in Ohio can be found at www.attorneygeneral.gov/Services/Business/Tobacco-Directory-Search. This list is periodically updated. Any brand not listed on this Web site is considered contraband and is subject to confiscation.