

# Town of Montague Tobacco and Nicotine Delivery Product Sales Permit Application all Years

*The owner must complete both sides of this form. A permit may be issued only after all required information, attachments and signatures are received. All permits must be approved by the Board of Health/Health Department.*

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Establishment Name \_\_\_\_\_

Owner Name \_\_\_\_\_

DBA ("Doing Business As" Name) \_\_\_\_\_

( ) \_\_\_\_\_  
Phone Mobile Phone

( ) \_\_\_\_\_  
Owner Phone Owner Mobile Phone

Establishment Address (Street, Community, ZIP) \_\_\_\_\_

Owner Address (Street, Community, ZIP) \_\_\_\_\_

Establishment Email \_\_\_\_\_

Owner Email \_\_\_\_\_

Manager Name \_\_\_\_\_

### Establishment Information

- |                                                          |                                  |                                 |
|----------------------------------------------------------|----------------------------------|---------------------------------|
| Is this a chain store?                                   | <input type="checkbox"/> Yes     | <input type="checkbox"/> No     |
| Is this an adult only establishment?                     | <input type="checkbox"/> Yes     | <input type="checkbox"/> No     |
| Is the establishment within 1000 ft. of a school?        | <input type="checkbox"/> Yes     | <input type="checkbox"/> No     |
| Is the establishment within 1000 ft. of a playground?    | <input type="checkbox"/> Yes     | <input type="checkbox"/> No     |
| Check the restricted products sold in the establishment. | <input type="checkbox"/> Keno    | <input type="checkbox"/> Liquor |
|                                                          | <input type="checkbox"/> Lottery | <input type="checkbox"/> Other: |

#### Check the establishment type

- |                                           |                                       |                                            |
|-------------------------------------------|---------------------------------------|--------------------------------------------|
| <input type="checkbox"/> Gas Station Only | <input type="checkbox"/> Supermarket  | <input type="checkbox"/> Grocery           |
| <input type="checkbox"/> Gas Mini-mart    | <input type="checkbox"/> Liquor Store | <input type="checkbox"/> Convenience Store |
| <input type="checkbox"/> Restaurant       | <input type="checkbox"/> Private Club | <input type="checkbox"/> Pharmacy          |
|                                           |                                       | <input type="checkbox"/> Other: List _____ |

#### Check any products sold in your establishment

- |                                             |                                                            |                                                                                                                  |
|---------------------------------------------|------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Cigarettes Packs   | <input type="checkbox"/> Small Cigars/Cigarillos           | <input type="checkbox"/> Roll Your Own                                                                           |
| <input type="checkbox"/> Cigarette Cartons  | <input type="checkbox"/> Little Cigars (Omega, Winchester) | <input type="checkbox"/> Chewing Tobacco                                                                         |
| <input type="checkbox"/> Single Cigars <\$5 | <input type="checkbox"/> Pipe Cigars (Black and Mild)      | <input type="checkbox"/> Loose Tobacco                                                                           |
| <input type="checkbox"/> Single Cigars >\$5 | <input type="checkbox"/> Rolling Papers                    | <input type="checkbox"/> Smokeless Tobacco                                                                       |
|                                             |                                                            | <input type="checkbox"/> Nicotine Delivery Devices ( e-cigarettes)                                               |
|                                             |                                                            | <input type="checkbox"/> Bunt Wraps                                                                              |
|                                             |                                                            | <input type="checkbox"/> Flavored Tobacco Products <b>ONLY</b><br><b>Menthol, Wintergreen &amp; Mint Allowed</b> |
|                                             |                                                            | <input type="checkbox"/> Other: List _____                                                                       |

### Permit Information

- |                                               |                          |
|-----------------------------------------------|--------------------------|
|                                               | <b>License /Permit #</b> |
| Does the establishment have a liquor license? | _____                    |
| Department of Revenue Tobacco Sales Permit    | _____                    |
| Department of Revenue Business Permit         | _____                    |

### Signatures

Permit Applicant Signature _____	Date _____
Board of Health/Health Department Signature _____	Date _____

### For Internal Use

Approved:  Yes  No    Permit Fee: \$ \_\_\_\_\_    Permit #: \_\_\_\_\_    Fee Paid:  Yes  No    Other: **TURN OVER →**

**A check mark signifies your understanding and agreement. I understand and agree that:**

- 1. It is against the law to sell any tobacco product and/or nicotine delivery product (e.g. e-cigarettes) to anyone less than **21 years of age**, regardless of how old the person looks.
- 2. Anyone selling tobacco products and/or nicotine delivery products must conclusively establish the customer's age as over **21 years old**, by means of government-issued photographic ID.
- 3. Anyone selling tobacco products and/or nicotine delivery products must check and verify official government photo ID for anyone less than 27 years of age.
- 4. I must consent to unannounced, periodic inspections and compliance checks of the permitted retail establishment.
- 5. Self-service tobacco products and/or nicotine delivery product displays from which the customer may select products are prohibited.
- 6. The sale of single or loose cigarettes or cigarettes in packages of fewer than 20 cigarettes is prohibited.
- 7. I may not sell or distribute any original package of two or more cigars, unless such package is priced for retail value of **\$5.00 or more**.
- 8. We may sell a single cigar having a retail price of no less than **\$2.50**.
- 9. I may not distribute any free samples of tobacco products or nicotine delivery products (e.g. e-cigarettes) and I may not accept any means, instruments or devices that allow for the redemption of tobacco products for free or at a reduced price below the minimum retail price determined by the Massachusetts Department of Revenue.
- 10. Tobacco vending machines are prohibited.
- 11. Commercial Roll Your Own devices are prohibited.
- 12. Blunt wraps are prohibited.
- 13. I may not sell tobacco products, including multiple packs below state minimum prices as posted on the Massachusetts Department of Revenue ([DOR](http://www.mass.gov/dor/businesses/help-and-resources/cigarette-and-tobacco-tax/)) website <http://www.mass.gov/dor/businesses/help-and-resources/cigarette-and-tobacco-tax/>
- 14. Penalties for violation of the regulation include monetary fines and/or suspension of this permit for seven days, thirty days or one year.
- 15. If I sell the permitted establishment, the buyer will be unable to receive a tobacco and nicotine delivery device sales permit unless any outstanding fines have been paid and any permit suspensions have been served.
- 16. The Tobacco and Nicotine Delivery Product Sales Permit will not be renewed if the permit holder has failed to pay all fines and served all permit suspension issued and the time period to appeal has expired.
- 17. I may not allow any employee to sell tobacco products or nicotine delivery products (e.g. e-cigarettes) until such employee reads this regulation and state laws regarding the sale of tobacco and signs a statement, a copy of which will be placed on file, that he/she has read the regulation and applicable state laws.
- 18. I must prominently display a copy of the "Permit to Sell Tobacco and Nicotine Delivery Devices".
- 19. I must provide the Board of Health with proof of a current "Cigarette Retailers License" from the Massachusetts Department of Revenue (DOR) and my DOR business permit (**Attach a copy of each permit/license**).
- 20. **No person shall sell or distribute flavored tobacco products, except in smoking bars and retail tobacco stores**
- 21. I must display Department of Public Health signs stating, "Sale of tobacco to Minors is prohibited".
- 22. I must display signs provided by the Board of Health that discloses referral information about cessation.
- 23. If I sell nicotine delivery devices (e.g. e-cigarettes) I must display signs stating that sale of nicotine delivery devices to minors is prohibited and that the used of e-cigarettes at indoor establishments is prohibited by local law.

**I have received, read and understand the Board of Health regulation "Restricting the Sale of Tobacco Products & Nicotine Delivery Products" and agree to abide by it.**

Signature \_\_\_\_\_

Date \_\_\_\_\_

Print Name \_\_\_\_\_