



# Connoisseurs License Application July 1st - June 30th

**MONTANA**  
Conapp  
Rev. 3-05

**Please return application and payment to:**

Montana Department of Revenue  
Liquor Licensing  
PO Box 1712  
Helena, MT 59604-1712

Telephone Number \_\_\_\_\_

Transaction	New
Beer	<input type="checkbox"/> \$ 50
Wine	<input type="checkbox"/> \$ 50
Beer/Wine Combo	<input type="checkbox"/> \$100

Date \_\_\_\_\_

Name \_\_\_\_\_

Shipping Address \_\_\_\_\_

Street and Number	City	State	Zip
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Please provide proof of age:  Copy of birth certificate     Driver's license     Other state-issued ID

**\*\*All importers, wineries and breweries must be registered with the Department of Revenue prior to shipping into Montana. For necessary forms call (406) 444-6900.**

Do you agree to furnish semi-annual (June 30th and December 31st) reports to the Department of Revenue showing the quantity of product and pay applicable taxes due?

Yes     No

Do you agree that you will faithfully comply with all the laws of the State of Montana pertaining to the shipments of all products and all rules and regulations of the Department of Revenue pursuant to 16-4-901; 16-4-902; 16-4-903; 16-4-910; 16-6-301, MCA?

Yes     No

This application is made for the purpose of licensing the above-mentioned connoisseur. Licensing may be cancelled or suspended by the Department of Revenue, upon finding after notice and hearing that licensee has not complied with the terms of its registration.

I declare under penalty of false swearing that the information in this application and attachment are true, correct and complete.

Applicant Signature \_\_\_\_\_

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