



**State of Arkansas
Department of Finance
And Administration**

DFA - ARKANSAS TOBACCO CONTROL

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<https://www.atc.arkansas.gov>



Vending Machine Stamps Request Form

(Tobacco Products, Vapor Products, Alternative Nicotine Products, or E-Liquid Products)

Instructions

- The Vending Machine Stamp Request Form allows a vending machine company who is permitted with Arkansas Tobacco Control to request the number of stamps that will be placed on each physical machine from which tobacco products, vapor products, alternative nicotine products, or e-liquid products will be delivered to consumers in the State of Arkansas. Each machine **MUST** have its own stamp.
- Fully complete this form. Incomplete forms will not be processed.
- Surety bonds and insurance can be purchased from any company the business feels appropriate, as long as the bond amounts fully cover the total number of vending stamps/machines owned by the company (outlined below).
- Completed forms and payment (NO CASH) can either be mailed to our office or hand delivered.

Business Information

Legal Business/Company Name: _____

Name of Business if different from Legal Name: _____
(Any fictitious name or 'Doing Business As' (DBA) name)

Physical Business/911 Address: _____ Suite/Unit #: _____
(Must be numeric address plus street name (example: 152 Smith St); CANNOT be a P.O. Box or location description)

City: _____ County: _____ Zip Code: _____

Business Mailing Address (if different): _____ Suite/Unit #: _____
(This is the address where you want to receive all communication from ATC; CAN include P.O. Box)

City: _____ County: _____ Zip Code: _____

Business Phone Number: (____) _____ - _____ Business Email: _____

Current ATC Permit (if applicable): _____

Number of machines you now operate or plan to operate in the coming year: _____

Number of Stamps Requested: _____ @ \$10.00 each = \$ _____ (pay this amount)
(1 stamp per current machine) (total amount)

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Surety & Insurance Information

A surety bond, the amount of which is determined in relation to the number of machines operated, shall be filed with ARKANSAS TOBACCO CONTROL together with an application for a Vendor Permit. The amount of bond required is:

Please note: Bond should cover all current machines and any future machines you plan to add in the coming year

| | |
|--------------------|------------|
| 1 to 30 Machines | \$2,000.00 |
| 31 to 60 Machines | \$3,000.00 |
| 61 to 90 Machines | \$4,000.00 |
| 91 to 120 Machines | \$5,000.00 |
| Over 120 Machines | \$6,000.00 |

AMOUNT OF BOND \$ _____

NAME OF BONDING COMPANY _____

ADDRESS OF BONDING COMPANY _____

NAME AND ADDRESS OF INSURANCE AGENCY: _____

Important Information

Please note that this form **MUST** be completed in its entirety. Any form that is submitted that is incomplete will **not** be accepted and will be returned to the applicant. Please review the form to ensure that you have provided all required information for submission.

By accepting vending machine stamps from Arkansas Tobacco Control, the permit holder is agreeing that they, their business, and any location a vending machine is housed will follow all lawful requirements and furthermore acknowledging that they understand that Arkansas Tobacco Control Agents, Federal Tobacco Control Agents, or any other lawful Tobacco Control Entity will periodically conduct inspections and compliance checks to ensure compliance with the law.

Legal Responsibility - Application Signature Page

By dating and signing below, I certify and attest that I am an owner or duly authorized agent, partner, officer, or Applicant and hereby declare and sign under penalty of law that the information provided on this form is true and correct to the best of my knowledge and belief. The undersigned applicant also agrees to faithfully comply with all local, state, and federal laws including, but not limited to, the "Unfair Cigarette Sales Act," A.C.A. § 5-27-227 (controlling the provision of minors with tobacco products and cigarettes and the placement of tobacco vending machines), the "Arkansas Tobacco Products Tax Act of 1977," all rules promulgated pursuant thereto, and all lawful orders of the Arkansas Tobacco Control Board. Applicant understands and agrees that any intentional false or misleading information, of any nature or relative to any item, will be sufficient grounds for any and all stamps to be suspended or revoked.

Date: _____

Signature of Owner or Authorized Representative _____

Printed Name of Owner or Authorized Representative _____