



**STATE OF NEVADA
OFFICE OF THE ATTORNEY GENERAL**

1 State of Nevada Way, Suite 100
Las Vegas, Nevada 89119

**TOBACCO IMPORTER ACCEPTANCE OF JOINT AND SEVERAL LIABILITY
FORM B&TD-TOB5**

IMPORTER INFORMATION			
Business Name:		Date:	
Address:			
Address (line 2)			
City:	State:	Zip:	Country:
Telephone:	E-Mail:		Website:
Contact Person/Title:			

FEDERAL TOBACCO IMPORTER PERMIT NUMBER:	
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A copy of the permit issued by the U.S. Department of Treasury, Alcohol & Tobacco Tax & Trade Bureau must be included with this form.

NON-PARTICIPATING MANUFACTURER FOR WHOM JOINT AND SEVERAL LIABILITY IS ACCEPTED FOR ESCROW DEPOSITS PURSUANT TO NRS 370A.140 AND REPORTS PURSUANT TO 370.327(1)			
Manufacturer Name:		Contact Person:	
Address:			
Address (line 2):			
City:	State:	Zip:	Country:
Telephone:	E-Mail:		Website:

BRAND FAMILIES TO BE IMPORTED FOR NON-PARTICIPATING MANUFACTURER	

IMPORTER'S REGISTERED AGENT FOR SERVICE OF PROCESS			
Business Name:		Contact Person:	
Address:			
Address (line 2):			
City:	State:	Zip:	
Telephone:	E-Mail:		State RA #:

NOTE: An original signed letter from the Registered Agent noting his or her service in this capacity must be included with this Form.

AFFIDAVIT OF IMPORTER

I certify that:

All of the information contained in this form is true and correct.

In my position with the importer, I am authorized to certify on behalf of the importer and can legally bind the importer.

In accordance with NRS 370.684, the importer accepts joint and several liability with the above identified Non-Participating Manufacturer for all escrow due pursuant to NRS 370A.140, including quarterly payments required pursuant to NAC 370.330, and reports required by NRS 370.327(1).

The importer consents to the jurisdiction of the Nevada courts for the purpose of enforcement of NRS 370.684.

By signing this affidavit on behalf of the importer, I understand the importer is required to comply with state and federal laws concerning the sale of tobacco products.

I declare under penalty of perjury under the law of the State of Nevada that the foregoing is true and correct.

Name

Title

Electronic/Signature

Date

Please email this completed and signed Tobacco Importer Acceptance of Joint and Several Liability form and any attachments to the Nevada Attorney General's Office - Tobacco Enforcement Unit:

E-mail to:

tobaccoenforcement@ag.nv.gov