

Master Application

Check appropriate box(es) and complete all applicable information.

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Business Licenses is
now <u>online</u> !
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	k appropriate box(es) and complete all applicable illioinfation.				<u>estop.mt.gov</u>				
Business Changes									
Register a new business with eS	top. See	Section II for fee	es that apply.						
Update business information, su	ıch as ma	iling address o	or contact infor	mation,	etc. No fee.				
☐ Change business structure or er	ntity type.	A liquor proces	ssing fee may ap	ply. See	Section II.				
Add a new physical location to y	our eSto	business . Se	e Section II for f	ees that	apply.				
Purchase of an existing eStop lo	cation. P	revious owner's	Location Numb	er					
ocation Changes - Provide curre Your Location Number is at the upper r			` '						
Relocate to a new physical locat	ion. A lice	nse fee may ap	ply. See Section	n II.					
Update location information, suc	ch as nam	e/DBA/trade n	ame, etc. No fe	e.					
☐ Update license information, such for fees that apply. Section I.	h as add,	increase/decre	ease, change lid	cense ty	pe, etc. See Section	n II			
Rusiness Information									
Company or Owner Name									
					(rec	uired)			
Company or Owner Name					(rec	juired) ZIP + 4			
Company or Owner Name Federal Employer Identification Number of	or Social Se	ecurity Number	City						
Company or Owner Name Federal Employer Identification Number of Business Mailing Address Type of Business (please check one and Sole proprietorship	or Social Se	ecurity Number ditional information	City		State				
Company or Owner Name Federal Employer Identification Number of Business Mailing Address Type of Business (please check one and Sole proprietorship Limited liability company	provide add	ecurity Number ditional information S corporation Association	City on if needed):	0	State Governmental Limited partnership				
Company or Owner Name Federal Employer Identification Number of Business Mailing Address Type of Business (please check one and Sole proprietorship Limited liability company C corporation	provide add	ecurity Number ditional information S corporation Association Limited liability	City on if needed):	<u> </u>	State				
Company or Owner Name Federal Employer Identification Number of Susiness Mailing Address Type of Business (please check one and Sole proprietorship Limited liability company C corporation Nonprofit C corporation	provide add	ecurity Number ditional information S corporation Association	City on if needed):	0	State Governmental Limited partnership				
Company or Owner Name Federal Employer Identification Number of Susiness Mailing Address Type of Business (please check one and Sole proprietorship Limited liability company C corporation Nonprofit C corporation Location Information	provide add	ditional information S corporation Association Limited liability Partnership	City on if needed): partnership	0	State Governmental Limited partnership Other				
Company or Owner Name Federal Employer Identification Number of Business Mailing Address Type of Business (please check one and Sole proprietorship Limited liability company C corporation Nonprofit C corporation	provide add	ditional information S corporation Association Limited liability Partnership	City on if needed): partnership	0	State Governmental Limited partnership Other				
Company or Owner Name Federal Employer Identification Number of Susiness Mailing Address Type of Business (please check one and Sole proprietorship Limited liability company C corporation Nonprofit C corporation Location Information	provide add	ditional information S corporation Association Limited liability Partnership	City on if needed): partnership	0	State Governmental Limited partnership Other				
Federal Employer Identification Number of Business Mailing Address Type of Business (please check one and Sole proprietorship Limited liability company C corporation Nonprofit C corporation Location Information Assumed Business Name/DBA/Trade Name	provide add	ditional information S corporation Association Limited liability Partnership	City on if needed): partnership	0	State Governmental Limited partnership Other	ZIP + 4			
Federal Employer Identification Number of Business Mailing Address Type of Business (please check one and Sole proprietorship Limited liability company C corporation Nonprofit C corporation Location Information Assumed Business Name/DBA/Trade Nath	provide add	ditional information S corporation Association Limited liability Partnership	City on if needed): partnership City	0	State Governmental Limited partnership Other State	ZIP + 4			
Federal Employer Identification Number of Business Mailing Address Type of Business (please check one and Sole proprietorship Limited liability company C corporation Nonprofit C corporation Nonprofit C corporation Assumed Business Name/DBA/Trade Name Physical Location Address County Contact Information	provide add	ditional information S corporation Association Limited liability Partnership	City partnership City City		State Governmental Limited partnership Other State Location Fax Nur	ZIP + 4			
Business Mailing Address Type of Business (please check one and Sole proprietorship Limited liability company C corporation Nonprofit C corporation Location Information Assumed Business Name/DBA/Trade Na Physical Location Address County	provide add	ditional information S corporation Association Limited liability Partnership	City partnership City City		State Governmental Limited partnership Other State Location Fax Nur	ZIP + 4			

License fee and payment information is on the other side of this form.

Signature (required)

I declare under penalty of false swearing that I am the applicant or the duly authorized representative of the entity making this application, and that the responses provided, including any accompanying information, are true, correct and complete.

Signature Title Date



Section II. License Fees

License	Type of Fee	Inspection Required	Fee	Quantity	Total Amount
Montana Lottery	Traditional Lottery. One-time fee.	No	\$50.00		
	Sports Bet (Wagering). One-time fee.	No	\$50.00		
Retail Food Establishment	Small - Establishments with one or two employees working at any one time. New or relocation fee applies.	Yes. Please contact your county environmental	\$85.00		
	Large - Establishments with more than two employees working at any one time. New or relocation fee applies.	health department.	\$115.00		
	Retailer - Tobacco	No	\$50.00		
Tobacco	Retailer - Vendor < 10 cigarette vending machines.	No	\$50.00		
Products and	Vendor ≥ 10 cigarette vending machines.	No	\$50.00		
Alternative Nicotine or Vapor Products	Wholesaler	No	\$50.00		
	Subjobber	No	\$50.00		
	Retailer - Alternative Nicotine or Vapor Products	No	\$20.00		
0,,0	Processing fee for new applicant, relocation and <i>some</i> business structure changes. Fee is nonrefundable.		\$200.00		
	Addition of beer or wine license to a current license Fee is nonrefundable.	Yes, if new application or	\$100.00		
Off-Premises Beer/Wine	Background check processing fee	application for transfer of location.	\$30.00		
	Beer	location.	\$200.00		
	Wine		\$200.00		
	Beer/Wine		\$400.00		
	New business application fee		\$25.00		
	Landscape Service	Not at registration	\$150.00		
	Sod Farmer	Not at registration	\$220.00		
	Nursery: \$5,000 or less gross annual sales	Not at registration	\$25.00		
Nursery License	Nursery: \$5,001 to \$75,000 gross annual sales	Not at registration	\$135.00		
	Nursery: \$75,001 to \$150,000 gross annual sales	Not at registration	\$200.00		
	Nursery: \$150,001 to \$250,000 gross annual sales	Not at registration	\$300.00		
	Nursery: \$250,000 gross annual sales	Not at registration	\$400.00		
Underground Storage Tanks	☐ Owner ☐ Operator (Please check one.)			· · · · ·	
	Tanks ≤1,100 gallons. New or relocation fee applies.	Not at registration, Every 3	\$36.00		
	Tanks >1,100 gallons. New or relocation fee applies.	years for operating permit.	\$108.00		
Meters - Petroleum Dealers	PA - Max delivery ≤ 20 gal/min	Yes	\$21.00		
	PB - Max delivery > 20 gal/min and ≤ 130 gal/min	Yes	\$70.00		
	PC - Max delivery > 130 gal/min	Yes	\$83.00		
	PD - LPG (Propane) meters	Yes	\$102.00		
Scales - Weighing Devices	S1 or SA - 0 through 499 lbs	Yes	\$20.00	İ	
	S2 or SB - 500 through 1,999 lbs	Yes	\$33.00		
	S3 or SC - 2,000 through 7,999 lbs	Yes	\$64.00		
	S4 or SD - 8,000.through 60,000 lbs	Yes	\$165.00		
	S5 or SE - 60,001 lbs or greater	Yes	\$280.00		

How to Make a Payment

- ► Go to <u>eStop.mt.gov</u> to apply and pay online!
- ▶ Pay by check made payable to eStop Business Licenses—be sure to write your Location Number in the memo line. Mail your check to: eStop Business Licenses, MT Department of Revenue, PO Box 8003, Helena, MT 59604-8003 Questions? Call us at (406) 444-6789 or fax us at (406) 444-3696.