



Municipality of Anchorage, Treasury Division
APPLICATION FOR A TEMPORARY OFF-SITE CERTIFICATE OF REGISTRATION
ALCOHOLIC BEVERAGES RETAIL SALES TAX
REGISTERED RETAILERS ONLY

IMPORTANT NOTICE

Send original form to:
Municipality of Anchorage
Treasury Div., Alcohol Tax
632 W, 6th Ave., Suite 330
P.O. Box 196650
Anchorage, AK. 99519-6650

INSTRUCTIONS

Please Type Or Print Clearly

GENERAL INFORMATION:

You must submit this application if:

- You are already registered as an alcoholic beverages retailer and you are operating under a separate permit issued by the State of Alaska for an off-premise event.
- You will be responsible for collecting and remitting the municipal alcoholic beverages retail sales tax.
- All required fields must match your AMCO permit.

For assistance:

- If you have any questions about this application, filing tax returns or any other municipal retail sales tax-related matters, contact the Treasury Tax Enforcement Officers at (907) 343-6670 or wwpt@anchorageak.gov.
- A variety of information, including AMC 12.65 and forms, is available on our website at www.muni.org/alcoholtax.

Additional instructions are included in the appropriate section of the application.

An application is considered complete only when all applicable information and a copy of your event permit have been provided to Treasury.

Treasury requires at least five business days after the application has been submitted and deemed complete in order to verify the information and documentation provided before issuing the Temporary Off-Site Certificate of Registration.

Complete this application and mail to:

Municipality of Anchorage
Finance Dept, Treasury Div.
Alcohol Sales Tax
P.O. Box 196650
Anchorage, AK 99519-6650

Or submit this application and a copy of your AMCO permit by email to wwpt@anchorageak.gov



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This certificate authorizes the holder to collect taxes on the alcoholic beverages sold at a place other than the premises for which the initial certificate of registration was issued. Additional information such as a letter from the property owner, site plan, etc. may be required to process your request. Ensure you have ALL necessary permissions, permits and/or approvals before submitting your request. Allow 5 business days to process complete applications.

Contact a Tax Enforcement Officer at (907) 343-6670 or wwpt@anchorageak.gov if you have any questions.

SECTION I. CURRENT PERMIT INFORMATION

- 1. Current Alcoholic Beverage Permit No. 2. Name of Current Alcoholic Beverage Retailer

[Empty box for permit number]

[Empty box for retailer name]

SECTION II. OFF-SITE EVENT LOCATION INFORMATION

- 3. Name of Event 4. Event Address

[Empty box for event name]

[Empty box for event address]

- 5. City 6. State 7. Zip 8. Event(s) Date

[Empty box for city]

[Empty box for state]

[Empty box for zip]

[Empty box for event date]

- 9. Please provide a detailed description of what records you will maintain to support tax collections and alcoholic beverage sales.

[Empty box for record description]

- 10. Is anyone charging an entry fee or requiring a ticket purchase for this event? Yes No

- 11. If yes, is any of the alcohol served included in the purchase price of the entry fee or ticket? Yes No

- 12. Have you confirmed and obtained all necessary permissions, permits and/or approvals from AMCO required for your event? Yes No

If "NO", Explain:

[Empty box for explanation]

- 13. Have you a caterer's or art exhibit permit? If "YES", Attach Copy. If "NO", Explain: Yes No

[Empty box for permit explanation]

With my signature below, I agree that I am responsible for remitting the tax collected at my off-site event. I will report the permit number, gross and tax-exempt sales on the supplemental schedule with my monthly tax return.

- 14. Name 15. Title 16. Signature 17. Date

[Empty box for name]

[Empty box for title]

[Empty box for signature]

[Empty box for date]

- 18. Email Address: 19. Phone Number

[Empty box for email address]

[Empty box for phone number]

Treasury TEO Initials: _____