

Master Application

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



Business Changes

- Register a new business with eStop. See Section II for fees that apply.
- Update business information, such as mailing address or contact information, etc. No fee.
- Change business structure or entity type. A liquor processing fee may apply. See Section II.
- Add a new physical location to your eStop business. See Section II for fees that apply.
- Purchase of an existing eStop location. Previous owner's Location Number _____

Location Changes - Provide current Location Number for box(es) selected below _____

Your Location Number is at the upper right-hand section of your eStop license and renewal.

- Relocate to a new physical location. A license fee may apply. See Section II.
- Update location information, such as name/DBA/trade name, etc. No fee.
- Update license information, such as add, increase/decrease, change license type, etc. See Section II for fees that apply.

Section I.

| | | | |
|---|--|--|---------------------------|
| Business Information | | | |
| Company or Owner Name _____ | | | |
| Federal Employer Identification Number or Social Security Number _____ (required) | | | |
| Business Mailing Address _____ | | City _____ | State _____ ZIP + 4 _____ |
| Type of Business (please check one and provide additional information if needed): | | | |
| <input type="checkbox"/> Sole proprietorship | <input type="checkbox"/> S corporation | <input type="checkbox"/> Governmental | |
| <input type="checkbox"/> Limited liability company | <input type="checkbox"/> Association | <input type="checkbox"/> Limited partnership | |
| <input type="checkbox"/> C corporation | <input type="checkbox"/> Limited liability partnership | <input type="checkbox"/> Other | |
| <input type="checkbox"/> Nonprofit C corporation | <input type="checkbox"/> Partnership | | |
| Location Information | | | |
| Assumed Business Name/DBA/Trade Name, etc. _____ | | | |
| Physical Location Address _____ | | City _____ | State _____ ZIP + 4 _____ |
| County _____ | Location Phone Number _____ | Location Fax Number _____ | |
| Contact Information | | | |
| Name _____ | | Phone Number _____ | |
| <i>Please Print</i> | | | |
| Email address _____ | | | |

Important: Complete Section II (other side of form), if applicable. In all situations, sign and date.
All coordinating applications and affidavits must be completed and attached for processing.

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

Mail completed form to: eStop Business Licenses, PO Box 8003, Helena, MT 59604-8003.

Questions? Call us at (406) 444-6900 or fax us at (406) 444-7723

Section II. License Fees

| License | Type of Fee | Inspection Required | Fee | Quantity | Total Amount |
|---|---|--|----------|----------|--------------|
| Montana Lottery | Lottery. <i>One-time fee.</i> | No | \$50.00 | | |
| Retail Food Establishment | Small - Establishments with one or two employees working at any one time. <i>New or relocation fee applies.</i> | Yes. Please contact your county environmental health department. | \$85.00 | | |
| | Large - Establishments with more than two employees working at any one time. <i>New or relocation fee applies.</i> | | \$115.00 | | |
| Tobacco Products and Alternative Nicotine or Vapor Products | Retailer - Tobacco | No | \$50.00 | | |
| | Retailer - Vendor < 10 cigarette vending machines. | No | \$50.00 | | |
| | Vendor ≥ 10 cigarette vending machines. | No | \$50.00 | | |
| | Wholesaler | No | \$50.00 | | |
| | Subjobber | No | \$50.00 | | |
| | Retailer - Alternative Nicotine or Vapor Products | No | \$20.00 | | |
| Off-Premises Beer/Wine | Processing fee for new applicant, relocation and <i>some</i> business structure changes. <i>Fee is nonrefundable.</i> | Yes, if new application or application for transfer of location. | \$200.00 | | |
| | Addition of beer or wine license to a current license <i>Fee is nonrefundable.</i> | | \$100.00 | | |
| | Background check processing fee | | \$30.00 | | |
| | Beer | | \$200.00 | | |
| | Wine | | \$200.00 | | |
| | Beer/Wine | | \$400.00 | | |
| Nursery License | 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: \$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 | <input type="checkbox"/> Owner <input type="checkbox"/> Operator (Please check one.) | | | | |
| | Tanks ≤1,100 gallons. <i>New or relocation fee applies.</i> | Not at registration. Every 3 years for operating permit. | \$36.00 | | |
| | Tanks >1,100 gallons. <i>New or relocation fee applies.</i> | | \$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 thru 499 lbs | Yes | \$20.00 | | |
| | S2 or SB - 500 thru 1,999 lbs | Yes | \$33.00 | | |
| | S3 or SC - 2,000 thru 7,999 lbs | Yes | \$64.00 | | |
| | S4 or SD - 8,000 thru 60,000 lbs | Yes | \$165.00 | | |
| | S5 or SE - 60,001 lbs or greater | Yes | \$280.00 | | |
| Total Amount Due | | | | | |

How to Make a Payment

- ▶ Go to eStop.mt.gov 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) 444-6900 or fax us at (406) 444-7723.