

**TOBACCO and NICOTINE
Delivery Products
APPLICATION for a
Sales Permit**



*Sutton Municipal Center
4 Uxbridge Road
Sutton, MA. 01590
Telephone (508) 865-8724
Fax (508) 865-8721*

**TOWN OF SUTTON
PERMITS EXPIRE YEARLY ON JUNE 30th**

Fee: \$120.00

Date _____

Permit is non-transferable

NAME OF BUSINESS: _____

DBA: _____

BUSINESS ADDRESS: _____

MAILING ADDRESS: _____

TELEPHONE _____ **FAX #** _____ **EMERGENCY #** _____

EMAIL ADDRESS: _____

TYPE OF ESTABLISHMENT

Food Service _____ Seasonal or Retail Food Service _____ Lounge/Bar _____ Gas Station _____
Package Store _____ Pharmacy _____ Retail _____

**PERSON RESPONSIBLE FOR THE BUSINESS – SEE CONDITIONS ATTACHED TO THIS APPLICATION
(INSTRUCTIONS FOR THE FOLLOWING QUESTIONS):**

- If the business is a sole proprietorship, the information provided below should be for the Proprietor(owner).
- If the business is a corporation, the information provided below should be for an officer of the corporation who will be held liable for any criminal acts of the corporation.
- If the business is a partnership, the information provided should be for a partner who will be held liable for any criminal acts of the partnership.

Name of Person Responsible for the Business(print) : _____

Address of Person Responsible for the Business: _____

Telephone #: _____ **Date of Birth** _____ **Federal Identification #** _____

THIS APPLICATION MUST BE FILLED OUT COMPLETELY BEFORE A PERMIT WILL BE ISSUED.
INCOMPLETE APPLICATIONS WILL BE RETURNED.

I, the undersigned applicant, agree to the conditions attached to this application.

Applicant's Signature _____

MUST ATTACH A COPY OF YOUR DOR (DEPARTMENT OF REVENUE) LICENSE: ☐

BOARD OF HEALTH USE ONLY

License # _____ **DATE** _____ **Check #** _____

Late Fee's will be incurred after July 1st: _____

APPLICATION FOR TOBACCO and NICOTINE DELIVERY PRODUCTS SALES PERMIT

- Tobacco and Nicotine Delivery sales permits are non-transferable and are only for the applicant at the location indicated on the front of this application.
- Tobacco and Nicotine Delivery sales permits must be renewed yearly, by July 1 of each year. It is my responsibility, as applicant/permit holder to apply for a permit each year.
- I agree to abide by all laws concerning tobacco and nicotine delivery products, including but not limited to: Regulations, Bylaws, Codes and /or Statutes of the Sutton Board of Health, the Town of Sutton, the Commonwealth of Massachusetts, and laws of the United States (including FDA regulations). It is my responsibility, as the applicant/ permit holder, to learn these laws and to follow all applicable laws. Failure to follow these laws may result in a fine and/or suspension/revocation / non- renewal of my tobacco and nicotine delivery product permit, as well as possible suspension/revocation/non-renewal of non-tobacco permits issued by the Sutton Board of Health and the Town of Sutton.
- I acknowledge that my establishment will be regularly inspected by a Sutton Board of Health member or agent to ensure compliance with all applicable laws. Inspections may include compliance in which a minor (or a person under 21 years of age) attempts to purchase tobacco and nicotine delivery products from my establishment. Because both federal law and Sutton regulations require that identification be checked when purchasers appear to be under 27, it is possible that minors participating in compliance checks may be over 17 years old, but under 21, I understand that my establishment will be in violation of federal, state, and Sutton laws if my store sells any tobacco or nicotine delivery products to a minor or person under 21. Identification must be checked to confirm age.
- I understand that it is my responsibility to properly train my employees/agents of all laws concerning tobacco and nicotine delivery products.
- I understand that all penalties will be applied to the holder of the tobacco permit.
- I understand that if a citation is issued as the result of a violation of the Sutton Board of Health regulation, I will have the following options:
 1. The fine can be paid in full, within 21 days of notice to the Sutton Board of Health. Payment of the fine will operate as final disposition of the matter and there will be no resulting criminal record.
 2. Within 21 days of the notice, if I elect, the matter can be contested in a non- criminal hearing.

Failure to pay fines or to appear at a hearing, even a hearing which I have requested, will result in a criminal complaint being issued against the person listed on the front of this application, as the person responsible for the business.

**APPLICATION FOR TOBACCO and NICOTINE DELIVERY PRODUCTS
SALES PERMIT**

- It is the right of the Sutton Board of Health to modify its regulations at any time, with notice, as required by law.
- If my establishment is a “Public Place” or “Retail Store” (as defined by the Sutton Board of Health Rules and Regulations Relative to the Sale, Vending, Distribution and Use of Tobacco or Nicotine Delivery Products within the Town of Sutton) it must be smoke free. If I provide a place for my employees to smoke, the location must conform to the Board of Health Regulations.
- Pursuant to M.G.L. Ch. 62C, sec. 49A, I certify under the penalties of perjury that I, to the best of my knowledge and belief, have filed all state tax returns and paid all state taxes required under law.