



# Alternating Proprietor on a Manufacturer's Premises

AltProp  
V1 9/2017

## Section 1 – Host Manufacturer Information

Entity Name \_\_\_\_\_

Business Name \_\_\_\_\_

Business Address \_\_\_\_\_

Mailing Address (if different) \_\_\_\_\_

Email Address \_\_\_\_\_ Phone \_\_\_\_\_

License Number   -    -     -

## Section 2 – Tenant Manufacturer Information

Entity Name \_\_\_\_\_

Business Name \_\_\_\_\_

Business Address \_\_\_\_\_

Mailing Address (if different) \_\_\_\_\_

Email Address \_\_\_\_\_ Phone \_\_\_\_\_

License Number   -    -     -

## Section 3 – Supporting Documents Required for Host and Tenant (see [ARM 42.13.1002](#))

- Alcohol and Tobacco Tax and Trade Bureau approval
- Description of the areas and equipment to be used by the tenant
- Copy of the host's floor plan identifying the areas to be used by the tenant
- Copy of the executed agreement between the tenant and the host

## Section 4 – Declaration and Affidavit (signature required for host and tenant)

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.

_____	_____	_____	_____
Host Signature	Date	Printed Name	Title
_____	_____	_____	_____
Tenant Signature	Date	Printed Name	Title

Mail this application with the required agreement to:

Department of Revenue  
Alcoholic Beverage Control Division  
PO Box 1712  
Helena, MT 59624-1712

**Questions?** Call us at (406) 444-6900, or Montana Relay at 711 for the hearing impaired.