United States Importer Declaration Form
Pursuant to Tenn. Code Ann. §§ 67-4-2601 et seq.

This Declaration must be executed by an officer of the Importer with authority to bind the Importer to the requirements of Tennessee law as stated below. Execution of this Declaration is an assertion that all information provided is true and correct, and that the Importer accepts and agrees to all the terms specified below.

STATUTORY REQUIREMENTS

Pursuant to Tenn. Code Ann. § 67-4-2602, a Non-Participating Manufacturer (“NPM”) located outside of the United States must provide a declaration from each of its importers to the United States that such importer accepts joint and several liability with the NPM for:

2. All penalties assessed under subsection Tenn. Code Ann. § 47-31-103(a)(3).
3. Payment of all costs and attorney fees pursuant to any successful action under Tenn. Code Ann. §§ 47-31-101 et seq., against said manufacturer.

Further, the importer has appointed a registered agent for service of process in this state according to the same requirements as established in this part for any non-resident or foreign non-participating manufacturer that has not registered to do business in this state as a foreign corporation or business entity.

Submit this completed form and all attachments with the Annual Directory Certification Application. Mail to:

Office of the Tennessee Attorney General and Reporter
Revenue Section
Tobacco Enforcement Division
P.O. Box 20207
Nashville, TN 37202
IMPORTER INFORMATION

Importer Name: ________________________________________________________________

Type of Business entity:
□ Sole Proprietorship
□ General Partnership
□ Limited Partnership
□ Corporation
□ Limited Liability
□ Other (specify): ____________________________________________________________

Include with Declaration:

Attached N/A
□ □ A copy of the current Articles of Incorporation

□ □ A copy of the current Certificate of Limited Partnership

□ □ A copy of the current Articles of Organization

□ □ A copy of the Importer’s current Tobacco Importer’s Permit issued by the United States Alcohol and Tobacco Trade Bureau, with any amendments.

Trading as (list all names ever used):
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Federal Employers Identification Number: ________________________________

Federal Tobacco Importer Identification Number: ______________________________

Physical Address: ___________________________________________________________
________________________________________________________________________

Mailing Address: ___________________________________________________________
________________________________________________________________________

Contact Name and Title: _____________________________________________________

Phone Number: __________________________ Fax Number: __________________________
Importer Declaration Form

E-mail Address: ________________________________________________________________

List the name, title and dates of service for all current and past Officers, Directors and/or Partners:

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

NON-PARTICIPATING MANUFACTURER IDENTIFICATION

Importer declares that it is a United States importer for the following NPM. Please identify the foreign NPM whose products you import into the United States. The Importer must complete this form for each manufacturer it represents; multiple NPMs may not be included on the same form.

Manufacturer Name: ___________________________________________________________

Mailing Address: _______________________________________________________________

______________________________________________________________________________

Phone Number: ________________________ Fax Number: _____________________________

E-mail Address: ________________________________________________________________

IMPORTER’S RESIDENT AGENT FOR SERVICE OF PROCESS

Resident Name: ________________________________________________________________

Mailing Address: _______________________________________________________________

______________________________________________________________________________

Phone Number: ________________________ Fax Number: _____________________________

E-mail Address: ________________________________________________________________

☐ Proof of Appointment. Attach an original letter from the resident agent accepting appointment as agent for service of process in Tennessee for the relevant sales year. Check the box to acknowledge that the letter is attached to this form.
If the Tobacco Product Importer is represented by outside counsel for the purpose of compliance with Tenn. Code Ann. §§ 47-31-101 et seq. and 67-4-2601 et seq., provide the following information:

Firm Name: __________________________________________________________

Attorney: __________________________________________________________

Address: __________________________________________________________

Phone: ___________________________ Fax: __________________________

E-mail Address: ____________________________________________________

The Importer identified above imports into the United States cigarettes manufactured by:

_________________________________________________________________

List the brand families imported on behalf of the Tobacco Product Manufacturer identified above.

_________________________________________________________________

_________________________________________________________________

The Importer imports these cigarettes under (check one):

☐ Written contract commencing ________________ and expiring ________________

☐ Oral contract or informal agreement

☐ A copy of the contract or informal agreement is attached.
DECLARATION

I certify that all of the information contained in this declaration and any attachments are true and accurate, and that I am authorized, under the laws of the state of Tennessee or the jurisdiction where the importer resides or is organized, to bind the importer making this certification.

Pursuant to Tenn. Code Ann. § 47-31-103(a)(2)(a), I declare that the importer accepts joint and several liability with the identified foreign Non-Participating Manufacturer for all escrow deposits due under subsection Tenn. Code Ann. § 47-31-103(a)(3), and amendments thereto; all penalties assessed under Tenn. Code Ann. § 47-31-103(a)(3), and amendments thereto; and payment of all costs and attorney fees pursuant to any successful action under Tenn. Code Ann. § 47-31-103(c), and amendments thereto, against the identified foreign Non-Participating Manufacturer.

In addition, I also declare that the importer:

1. Has appointed a resident agent for service of process in Tennessee.


3. Has waived any sovereign immunity defenses in a form and manner acceptable to the Attorney General.

Executed this _______ day of __________________, 20_____.

________________________________________
Signature of Authorized Officer/Agent for Importer

______________________________
Name and Title (Please Print)

On ____________, 20___, before me personally appeared___________________________.

Personally known to me (or proved to me on the basis of satisfactory evidence) to be the person whose name is subscribed to the instrument herein and acknowledged to me that he/she executed the same in his/her authorized capacity, and that by his/her signature on the instrument the person, or the entity upon behalf of which the person acted, executed the instrument.

WITNESS my hand and official seal:

Signature: ________________________________

My Commission Number: __________________

My Commission Expires: __________________