



KANSAS DEPARTMENT OF REVENUE
ALCOHOLIC BEVERAGE CONTROL DIVISION
915 SW HARRISON
TOPEKA, KANSAS 66625-3512
785-296-7015
785-296-7185 Fax
ABC_Marketing_Unit@kdor.state.ks.us

Cereal Malt Beverage Application Checklist

Application Type:

- Off-Premise Consumption (grocery stores, convenience stores, etc.)
 On-Premise Consumption (taverns, restaurants, etc.)
 Off-Premise **and** On-Premise Consumption (tavern or restaurant sells CMB for consumption on the premise and unopened packages for consumption off the premise). **Requires two applications and two licenses.**

YES **NO**

CMB Application:

- | | | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | The application is on the form prepared by the Office of the Kansas Attorney General's as required by K.S.A. 41-2702(c). Cities/counties cannot create their own CMB license application form. |
| <input type="checkbox"/> | <input type="checkbox"/> | I have verified the application is complete. |
| <input type="checkbox"/> | <input type="checkbox"/> | I have collected the \$25 State CMB Stamp fee. |
| <input type="checkbox"/> | <input type="checkbox"/> | I have collected the appropriate annual license fee. The fees are: <ul style="list-style-type: none">▪ On-Premise Consumption \$25 - \$200▪ Off-Premise Consumption \$25 - \$50 |

Kansas Retailer Sales Tax Registration Number:

Applicants must be registered with the Department of Revenue to collect and remit sales tax, which is then **distributed to your city or county**.

- | | | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | The applicant has entered their sales tax number. |
| <input type="checkbox"/> | <input type="checkbox"/> | The applicant does not have a Kansas Sales Tax Number, but has applied for one. I have written "applied for" on the upper left corner of the application. |
| <input type="checkbox"/> | <input type="checkbox"/> | The applicant does not have a Kansas Sales Tax Number. I have instructed the applicant how to obtain their Kansas Business Tax Application (CR-16) and written "applied for" on the upper left of the application. To obtain the Kansas Business Tax Application, they may: <ol style="list-style-type: none">1. Complete the Business Registration On-Line via the(Kansas Business Center http://www.ksrevenue.org/busregistration.htm2. Download and print the application. http://www.ksrevenue.org/busregistration.htm3. Send an e-mail requesting the form to forms@kdor.state.ks.us,4. Call the Kansas Department of Revenue Forms Order Line at 785-296-4937 |

License:

- | | | |
|--------------------------|--------------------------|---|
| <input type="checkbox"/> | <input type="checkbox"/> | I have issued the appropriate license and affixed the State CMB Stamp. <i>If the applicant is applying for both an on-premise and off-premise license, I have issued two licenses.</i> |
| <input type="checkbox"/> | <input type="checkbox"/> | I have completed the "FOR CITY/COUNTY OFFICE USE ONLY" section |

Reporting CMB Stamp Sales to the ABC:

FILING:

1. Complete your CMB Stamp Report (ABC-301) using the instructions provided with the form.
2. If you have issued CMB licenses for the report period, attach a copy of each application that has the red State CMB Stamp affixed and remit \$25 for each application by the due date. You do not need to include copies of the license that you issue.
3. **If you did not sell any CMB Stamps, you are still required to file the quarterly report (ABC-301) indicating "no sales".**
4. Retain a copy of the completed report for your records.

To ensure the correct State CMB Stamp fees are received, please keep all approved applications until your report is due. **DO NOT submit applications without the CMB Stamp Report (ABC-301) and payment.**