

The purpose of this documentation is to provide instructions on applying for a Tobacco, Vapor Products, and/or Alternative Nicotine Products license through the Georgia Tax Center (GTC).

NOTE: You must have a registered Georgia Tax Center account.

1. Log into your GTC account at https://gtc.dor.ga.gov





2. Under the Column - I Want To - Click on "See more links"

\equiv Georgia Tax Center	🔅 Settings 💡 Help 🔒 Log Off	
de Home		
🚣 Logon	Alerts	📋 I Want To
- >	There is 1 unread message	Manage payments and returns
		Make a payment
		Manage my credits
		Request payment plan
		Request sales tax exemptions
		See more links

3. Click on Register a New Tax Account

\equiv I Want To	🔅 se	ttings	? Help	🔒 Log Off
👩 Home 🔹 I Want To				
I Want To				
Å Add Access to Another Account	Add access to an existing account so that you manage it			
🗹 Apply for a Direct Pay Permit	Request a Direct Pay Permit			
Licensees	Manage Licensees for my alcohol and tobacco licenses			
Manage NAICS Codes	Add or update my NAICS codes			
Register a New Tax Account	Register a New Tax Account			
📁 Request Tax Clearance Letter	Request a Tax Clearance letter			
6 Submit Documentation	Submit documentation when requested on mail			
Legislation Submit Power of Attorney	Submit Power of Attorney documentation			
A Update Officers	Update the owners, officers, and responsible parties for my business			
💋 Upload a File	Upload a file with return data and supporting documents			



4. Select Account Type from list -Tobacco - then click next

New Account	Registration			🔅 Settings	? Help	🔒 Log Off
Home 🐂 I Want To	New Account Registration					
w Account Registrati	ion					
COUNT	Select Account					
Select Account	Select the account type you wish	n to r	egister.			
	Select Account Type from list					
	Required	Y				
	Required	4	Required			
	Aduit Entertainment Tax Alcohol License Composite Tax Corporate Income Tax Fireworks Excise Tax International Fuel Tax Motor Fuel Distributor Tax Motor Fuel Distributor Tax Motor Fuel Retailer Non-Prepaid 911 Charge Prepaid Wireless 911 Charge Public Service Commission Public Utilities and Airlines Qualified Timberland Property Railroad Equipment					
ve Draft Cancel	Sales & Use Tax State Hotel-Motel Fee Tobacco License Transportation Services Tax				¢ Previous	Next >

■ New Account Re	egistration	😰 Settings	? Help	🔒 Log Off
📅 Home 🔹 I Want To 🏓	New Account Registration			
New Account Registration ACCOUNT Select Account	Select Account Select the account type you wish to register. Select Account Type from list			
	Tobacco License			
Save Draft Cancel			Previous	Next >



5. Address Information- New or Existing

New –For a retail license, if this option is selected you must first <u>apply for a Sales and</u> <u>Use Tax Account</u> for the new business location address

Mailing Address - Choose Yes or No

- a. Yes for same mailing address
- b. No You will be prompted to enter mailing address
- c. Click Next

elect Account	Enter address information
ddress	Enter address mornation.
	Now a power an existing address for this account?
	Listing
	Enter your business location address.
	Select Country from list
	USA 🗸
	Street
	Required
	Required
	Street 2
	Select Unit Type from list (Apt, Suite, etc.)
	×
	Unit # (if Unit Tyrna is calacted)
	Unit # (if Unit Type is selected)
	City
	Required
	Select State from list
	GEORGIA 🗸
	Zin Code +4
	Required
	Select County from list
	Required
	Attention
	Verify your address
	Address must be verified before continuing.
	Is your mailing address the same as your business
	address?
	Tes No



Existing –For an existing account select the "use this address" box for the applicable business address. <u>NOTE:</u> If applying for a retail license you must select the applicable address that has a Sales and Use Tax account.

\equiv New Account R	egistration	🗯 Settings 🕐 Help 🔒 Log Off
🚮 Home 🔹 I Want To 🔹	New Account Registration	
New Account Registration ACCOUNT Select Account Address	Address Enter address information. Use a new or an existing address for this account? New Existing Select existing address to use. Use This Address Has Sales Address	Show History Filter
Save Draft Cancel	Is your mailing address the same as your business address?	✓ Previous



6. Enter Tobacco License Details

- a. Choose your start date
- b. Choose License Type: Retail, Manufacturer, Wholesaler, or Importers NOTE: The below example is for a Retail License type. Manufacturers, Wholesalers, and Importers will be required to enter bond details (not pictured)
- c. Option of Pickup or Mail
- d. Select Tobacco License Sales Types choose the products you intend to sale
 - i. Tobacco Products
 - ii. Vapor Products
 - iii. Alternative Nicotine Products
- e. Have you ever been arrested? Answer yes or no
- f. Have you acquired the buisness in its entirety from another business? Answer yes or no

È.

elect Account	Enternant Telesce Lisence Information	Enter the following information about arout biotomy		
ldrace	Enter your robacco License information.	Enter the following information about arrest history.		
101655	Account Start Date	 Failure to list all arrests can result in a permanent 		
bacco License	21-Jul-2021	ban of all licenses.		
	Select License Type from list	 All allests will be need to be investigated prior to your license being issued; this can result in a dela 		
	Retail 🗸	of the processing of your license.		
		Have you ever been arrested?		
	You will also be registered for the following account types:	Yes No		
	Tobacco Tax	Enter Change of Ownership information		
	How would you like to receive your license?			
	Mailed Pickup	another business?		
	Your license will be mailed to you	Yes No		
	Yes No Vapor Products No Yes No Alternative Nicotine Products Yes No You will be registered for the following Tobacco sales types: • Tobacco Products			
	Vapor Products Alternative Nicotine Products			



7. Licensee Information – Select: Existing or New

Existing Licensee: Check Licensee Box

a. Confirm the information is correct and check the "Use this Licensee" box.

Notice According	Licensee					
elect Account	Select licensee info	ormation.				
ddress	Use a new or an exis	ting licensee for th	is account?			
obacco License	Existing	New				
icensee	Licensees with an ex selected; they must b selected. Select licensee to u	pired affidavit doct be renewed before se.	ument cannot be they can be	9		Fi
	Licensee Name		ld #	Business Id #	Expiration Date	Use this license
			SSN:			



New Licensee:

Select the Licensee –Business or Individual

- a. Enter Social Security #, Name and Address of Licensee (person responsible for license)
- b. Licensee age information over 21 years Select Yes or No
- c. Licensee Residency Status from Drop Down Menu List
- d. Licensee Date of Birth

crAccount	Select licensee information.	
ess cco License	Use a new or an existing licensee for this account? Existing New	
nsee	Licenses Information	Enter Licenses address information
		Enter Licensee address mormation.
	Who is the licensee for this license?	Select Country from list
	 Licensee must match the licensee designated on the local license. 	USA 🗸
		Street
	Business Individual	
	List the Officer who will be submitting the Citizenship	City
	Affidavit & Secure and Verifiable documents for this license.	
	For more information about attranchin affidavite attack	
	here.	Select State from list
	Enter Licensee Id information.	
	Select Id Type from list	Zip Code + 4
	Social Security #	
		Salast County from list
	Social Security #	
	Enter Licensee name information.	Phone Number
	First	
		Enter Licensee residency information.
	Middle Initial	Select Residency Status from list
		US Citizen 🗸
		Licensee Date of Birth
	Last	
	Enter Licensee age information.	
	Is licensee 21 years old or older?	
	Yes No	



8. Payment Information

Select Method of Payment

ACH Debit – Using a bank account

- a. Select Bank Account Type
- b. Select Bank Account Type Checking or Savings
- c. Enter Routing Number
- d. Enter Account Number
- e. Confirm Account Number

NTS		
	The following is a list of fees which must be paid.	59
ients	The following fees must be paid: Tobacco Registration Fee: \$20.00 Total Fee: \$20.00	
	Payment Method	
	Please select your method of payment.	
	Acri Debit Credit Card	
	Payment Channel	Payment
	Туре	Pay Balance of 20.00
	Required V	Yes No
	Bank Account Type	Amount
	Required	20.00
	Routing Number	Confirm Amount
	Required	Required
	Account Number	
	Account Number	
	Required	
	Required Confirm Account Number	



Credit Card – Third party vendor "Official Payments" will send a link via email to make the credit card payment

COUNT	Payments	
IENTS	The following is a list of fees which must be paid.	
Payments	The following fees must be paid:	
	Tobacco Registration Fee: \$20.00	
	Total Fee: \$20.00	
	Payment Method	
	Please select your method of payment	
	ACH Debit Credit Card	

9. Officers

- a. Confirm Officers
- b. Red Dot Select and enter officer information who will be responsible for submitting the citizenship affidavit in support of the license

	Officers		
YMENTS	Minimum number of active Officers required:	1	
ODITIONAL INFO	Number of active Officers entered: 1 Number of active Responsible Parties entere Please select an officer type for each officer.	:d: 0	
	Officer & Responsible Party Info	•	Add Officer/Responsible F
	Show Errors 1 - 2 of 2	Linna con	
	Owner Name	Officer Type	Effective Date
		Officer	01-Jan-2010
	Add a Record 2 Rows	Required	



10. Attachments- Under Column titled – Minimum Required

- **a.** Attached Required documents
- **b.** Click on Add Attachments upload from your computer

ACCOUNT	Attachments				
PAYMENTS	Please attach all requ	uired documents.			Filter
ADDITIONAL INFO	Attachment Type		Attached	Minimum Required	Max Allowed
ATTACHMENTS	Occupational Tax Cert	ificate / Business Local License	0	1	1
Attachments	Additional Documenta	tion	0	0	10
	Power of Attorney RD	1061	0	0	1
	Туре	Name		Size	
Save Draft Cancel				< Prev	rious Next >



Choose Attachment Type

CCOUNT	Attachments					
AYMENTS	Please attach all required docume	nts.			Filte	
DDITIONAL INFO	Attachment Type		Attached	Minimum Required	Max Allowed	
TTACHMENTS	Occupational Tax Certificate / Business Local License		0	1		
Attachments	Additional Documentation		0	0	1	
	Power of Attorney RD-1061		0	0		
	3 Rows Select a file to attach		2			
ave Draft Cancel	Ty Chr Additional Docum Alcohol Bond(s) ATT-17 Personnel Certificate of Auth Citizenship Affidax Class B Limo Cert Corporate Charter Donated Wine Inv Federal Basic Per Food Sales Estab Forest Manageme Historical Places O IRS Proof of Non Letter Good Stand Letter of Approval	entation Statement ority /it ifficate or Bylaws entory List mit lishment Lic ent Plan Certificate Profit Status ding other St.		emory until you close.	rious	
Be	Local Lic / Letter (// Approval	Local License		casionally require taxpayers to change their passw h Friday between 8:00 am and 6:30 pm.	
Be Georgia Department of Revenue You are encouraged	strives to provide taxpayer Local License o create confidential and control Motor Fuel Bond()		x h	casionally require taxpayers to o Friday between 8:00 am and 6	change their passv 1:30 pm.	



11. Review details and click on **Submit**

New Account Registration				
ACCOUNT PAYMENTS ADDITIONAL INFO ATTACHMENTS New Account Registrati	Account Type Payment Amount	: Tobacco License : \$20.00		
Save Draft Cancel			Previous	Submit

12. Confirmation Page: Can be printed for your records.

Submission morma	tion	
Logon	Submitted	
Confirmation Number	Submitted	
Taxpayer Name		
Federal Employer ID #		
Submission Litle	New Account Registration	
oublinited	21 001 2021	
Your request has been sul If you have any questions, Printable Viev	omitted and will be processed in the order that it was received. please contact us at 1-877-GADOR11 (1-877-423-6711). w	
OK		