Tab to navigate within form. Use mouse to check applicable boxes, press spacebar or press Enter.

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PERMITTEES STATEMENT OF BRAND FRANCHISE AND SALES AREA DESIGNATION

Wisconsin Department of Revenue
Excise Tax Section 6-107
PO Box 8900
Madison, WI 53708-8900
(608) 261-6435
Fax (608) 261-7049

Legal Name	Permit Number

Street Address	City	State	Zip Code

PERMITTEES STATEMENT OF BRAND FRANCHISE AND SALES AREA DESIGNATION

No Wisconsin liquor wholesaler or rectifier may sell any distilled spirits and wine in Wisconsin until a written statement is filed with the department indicating that (1) the permittee is a distributor of a particular brand of liquor in Wisconsin, and (2) sales of the brand by the permittee and anyone purchasing from the permittee will be limited to the franchise sales area specified. The permittee shall notify the department of any change in the area within seven days of the effective date of the change.

Attach a list if more space is needed and check the box indicating that a list is attached. ☐

Manufacturer (Name, City, State)	**Brand or Brand Name**	**Franchise Sales Area** (Counties or portion of counties)

SIGNATURE (All applicants must sign)

I declare under penalties of the law that I have examined this information and to the best of my knowledge it is true, correct, and complete.

Signature (do not print or type)	Title	Date
Signature (do not print or type)	Title	Date

If applicant is a corporation, the president and the secretary must sign. If applicant is a partnership, two partners must sign. If applicant is a limited liability company, two members must sign unless the limited liability company only has one member.

Go to Page 2

Manufacturer (Name, City, State)	**Brand or Brand Name**	**Franchise Sales Area** (Counties or portion of counties)

Go to Page 1