



Louisiana Department of Revenue  
 Taxpayer Services Division  
 Excise Taxes Section  
 P. O. Box 201  
 Baton Rouge, Louisiana 70821

**APPLICATION FOR WAIVER OF \_\_\_\_\_ TAX SURETY BOND**  
 ALCOHOLIC BEVERAGE/BEER/TOBACCO

In accordance with the provisions of Acts 1985, Nos. 48 and 105, and Acts 2006, Nos. 108 and 454, I hereby apply for waiver of my \_\_\_\_\_ Tax Surety Bond. Before this waiver is granted, I realize that all of the following qualifications must be met in order that the surety bond requirement be waived by the State of Louisiana, Department of Revenue.

**QUALIFICATIONS OF WAIVER OF \_\_\_\_\_ TAX SURETY BOND**  
 ALCOHOLIC BEVERAGE/BEER/TOBACCO

1. Applicant agrees to maintain fixed assets in Louisiana at a net value of not less than one and one-fourth (1 1/4) times the amount of the bond otherwise required. A notarized affidavit is to be attached attesting to the location and amount of fixed assets in Louisiana.
2. The Tax Surety Bond has been on file with the Department for a period of not less than three (3) years.
3. Applicant has not been delinquent in filing reports and remitting taxes accrued or accruing during the three (3) year period immediately preceding the application for waiver of bonding requirement.
4. Applicant must furnish audited financial statement with waiver request.

It is hereby understood that should the requirement for posting a surety bond be waived by the Department of Revenue and should the applicant become delinquent after the waiver has been granted, the applicant must post a surety bond in the amount required by the Department of Revenue. Such delinquent applicant shall not be eligible to petition for a waiver of a surety bond for a period of three (3) years thereafter.

**BOND IS NOT TO BE CANCELLED UNTIL PERMISSION HAS BEEN GRANTED FOR CANCELLATION FROM STATE OF LOUISIANA, DEPARTMENT OF REVENUE.**

**PLEASE PRINT OR TYPE.**

NAME OF BUSINESS	ACCOUNT NUMBER
LOCATION ADDRESS	MAILING ADDRESS
CITY, STATE, ZIP	TELEPHONE NUMBER (      )

The undersigned applicant hereby declares under penalty of law that the above listed meets all of the qualifications for waiver of bond, and the information provided above is true and correct to the best of his knowledge.

NAME OF BUSINESS	SIGNATURE X
DATE (mm/dd/yyyy)	TITLE

**APPROVED FOR WAIVER:**

BY: \_\_\_\_\_  
 DIRECTOR

Date (mm/dd/yyyy): \_\_\_\_\_