

**NEVADA DEPT OF TAXATION**  
**LIQUOR LICENSE ADDRESS AFFIDAVIT**

I, \_\_\_\_\_ hereby swear and affirm that the  
following is true and correct.  
Authorized Person

I declare that the address provided below is the location from where the liquor will be shipped for

Importer / Wholesaler Holder \_\_\_\_\_,  
Entity Name

\_\_\_\_\_ DBA Name

Address: \_\_\_\_\_

City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_

Please provide a brief explanation of why the liquor does not ship from the Importer / Wholesaler  
location listed on the Federal Basic Permit.

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Signature of Authorized Person \_\_\_\_\_ Date \_\_\_\_\_

Title \_\_\_\_\_

Address \_\_\_\_\_

Telephone Number \_\_\_\_\_

**Please provide a copy of your Federal Basic Permit showing the actual premise location.**