

**Registration Form**  
**Wine Shipper Permittee**  
North Carolina Department of Revenue



Federal Employer ID Number: \_\_\_\_\_ Wine Shipper Permit Number: \_\_\_\_\_

Type of Form (Check One):     Initial Registration     Change in Registration Information

Legal Name: \_\_\_\_\_

Trade Name (DBA Name): \_\_\_\_\_

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

City \_\_\_\_\_ State \_\_\_\_\_

Zip Code \_\_\_\_\_ County \_\_\_\_\_

Mailing Address: Street or P.O. Box \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Zip Code \_\_\_\_\_ County \_\_\_\_\_

Name of Contact Person: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Mailing Address: Street or P.O. Box \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_

Zip Code \_\_\_\_\_ County \_\_\_\_\_

Each winery that has been issued a wine shipper permit by the North Carolina Alcoholic Beverage Control Commission is required to register with the Department of Revenue pursuant to G.S. 18B-1001.1. **Please complete this registration form in detail.** The wine shipper permittee must notify this office of any changes in the registration information provided on this form **as such changes occur.**