

**Submit all of the following documents as they apply to you:**

- 1. Completed application, signed and dated
- 2. License fees
- 3. Completed ABL-946 for each principal
- 4. Completed ABL-920 for each principal, officer, owner, member, and/or partner. If applicable, include his or her non-citizen alien registration number and attach a copy of all appropriate immigration documents.
- 5. Criminal record check (CRC) for all principals that is less than 90 days old. If the principal has lived in SC for more than two years, the CRC must be completed by the State Law Enforcement Division (SLED) at [www.sled.sc.gov](http://www.sled.sc.gov) or SLED Headquarters, Criminal Records Department, PO Box 21398, Columbia, SC 29221. If the principal has lived in SC for less than two years, the CRC must be submitted from the previous state of residency and from SLED. If principal is not a SC resident, the CRC must be submitted from the current state of residency. Attach a disposition for any charge that does not list the court charge.
- 6. Articles of Incorporation if applying as a corporation
- 7. Articles of Organization and the LLC Operating Agreement or ABL-919 if applying as an LLC
- 8. Sales Retail License Number. Contact the SCDOR License and Registration Section at 1-844-898-8542 if you don't have your number.
- 9. Copy of TTB Producers and Blenders Basic Permit



STATE OF SOUTH CAROLINA
DEPARTMENT OF REVENUE
APPLICATION FOR OUT OF STATE
WINE SHIPPERS LICENSE

Mail to: SCDOR, ABL Section, PO Box 125, Columbia, SC 29214-0907
Phone: 803-898-5864

File Number: \_\_\_\_\_

License Fee: \$600 Biennially
Expires August 31st of even numbered years

Form with sections: 1. Legal entity name or sole proprietor, 2. Physical location of business, 3. Mailing address, 4. Trade name, 5. Type of ownership, 6. Business phone number, 7. FEIN/SSN, 8. Sales Retail License Number, 9. Email

DESIGNATED AGENT

You must designate a person to receive all notices from the SCDOR concerning your license and/or permit. These notices will be sent to the person at the mailing address shown in question 3.

Name of designated agent or compliance agent \_\_\_\_\_ Compliance agency name, if applicable \_\_\_\_\_

Applications take at least four to six weeks to process. If the application is denied by the SCDOR this process will be delayed.

I certify that this business meets the legal requirements under South Carolina law for the license and/or permit type for which this application is being filed.

I understand that a misstatement or concealment of fact in an application is sufficient grounds for the revocation of the license and/or permit.

SWORN to and subscribed before me this
day of \_\_\_\_\_, year of \_\_\_\_\_
Notary Public for \_\_\_\_\_
My Commission Expires: \_\_\_\_\_
Notary (legal signature) \_\_\_\_\_
Notary (printed name) \_\_\_\_\_

Principal's Signature \_\_\_\_\_



STATE OF SOUTH CAROLINA  
DEPARTMENT OF REVENUE  
**GENERAL INFORMATION FOR  
WINE SHIPPERS LICENSE**

**The information provided is for general guidance only. It should not be considered, or substituted for legal advice. The SCDOR's staff will not provide legal advice. Read the laws, regulations, and applicable court decisions carefully before applying.**

A wine shippers license allows you to ship up to 24 bottles of wine each month directly to a resident of South Carolina who is at least 21 years of age for their personal use and not for resale.

All wine shippers license holders must follow these guidelines:

1. You cannot ship more than 24 bottles of wine each month to one person.
2. All shipments must be clearly labeled "CONTAINS ALCOHOL: SIGNATURE OF PERSON AGE 21 OR OLDER REQUIRED FOR DELIVERY."
3. You must file a report no later than January 20th of each year with the SCDOR of the total amount of wine shipped into South Carolina in the preceding year and pay taxes on these shipments.
4. You must permit the SCDOR to perform an audit of your records upon request.
5. You consent to follow the laws and regulations of South Carolina and the SCDOR.

See SC Code Section 61-4-747 at [dor.sc.gov/policy](http://dor.sc.gov/policy).

Your license must be renewed by August 31 of even numbered years. Renew online at [MyDORWAY.dor.sc.gov](http://MyDORWAY.dor.sc.gov).

#### **Social Security Privacy Act Disclosure**

It is mandatory that you provide your Social Security Number on this tax form if you are an individual taxpayer. 42 U.S.C. 405(c)(2)(C)(i) permits a state to use an individual's Social Security Number as means of identification in administration of any tax. SC Regulation 117-201 mandates that any person required to make a return to the SCDOR must provide identifying numbers, as prescribed, for securing proper identification. Your Social Security Number is used for identification purposes.



### What you need to know

- The SCDOR cannot issue a license and/or permit to anyone that owes delinquent taxes, penalties, or interest.
- If an entity who is not an individual applies for a license and/or permit, all principals of the entity must also apply. See SC Code Sections 61-2-160 and 61-2-100 at [dor.sc.gov/policy](http://dor.sc.gov/policy).
- To apply, you must allow information about your South Carolina taxes to be shared with any party.
- The information that may be shared includes, but is not limited to, information about delinquent taxes, penalties and interest, outstanding liabilities, or information concerning failure to file returns.
- You are waiving your rights under SC Code Sections 12-54-240 and 30-2-1. You can read the full code sections at [dor.sc.gov/policy](http://dor.sc.gov/policy).
- Anyone applying for a license and/or permit authorizes SC Law Enforcement Division (SLED) to perform a criminal records check. SCDOR has the right to share that information with other principals or applicants to process the application or any renewal.

Complete a Consent and Waiver for each principal. Use the applicable number below for each principal.

### Principal Types:

1. The owner (for sole proprietors only)
2. All officers of the business or entity which owns the business
3. All partners (limited partners that cannot exercise management control do not need to sign)
4. All persons who own 25% or more of the value of the business or entity
5. All persons who own 25% or more of the combined voting power of the business or entity
6. A manager of a limited liability company which is managed by managers
7. A member of the limited liability company which is managed by members
8. Any fiduciary who manages, controls title, or is otherwise in control of the business
9. All employees who will have day-to-day operational management responsibility for the business or entity
10. The designated license holder (designated agent) of a publicly traded corporation (must be a resident of SC)
11. All other principals not specified above. If not a publicly traded corporation, list all stockholders.
12. All officers and directors of a nonprofit organization

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File Number: \_\_\_\_\_

Legal entity name or sole proprietor \_\_\_\_\_

FEIN/SSN \_\_\_\_\_

Name \_\_\_\_\_

Home Address (No PO Box) \_\_\_\_\_

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

Month/Date/Year of SC Residency \_\_\_\_\_ Date of Birth \_\_\_\_\_

SSN \_\_\_\_\_ FEIN \_\_\_\_\_

Principal Type (1-12; see page 1) \_\_\_\_\_ Percent of Ownership \_\_\_\_\_

Have you as an individual, or as an organization in which you were a principal, had any license to sell beer, wine, or alcoholic liquors revoked or suspended in this state or any other state?  
 Yes  No **If yes, you must attach an explanation.**

Have you been convicted of a crime in South Carolina or any other state?  
 Yes  No **If yes, you must attach an explanation.**

**SWORN to and subscribed before me this**  
\_\_\_\_\_ day of \_\_\_\_\_, year of \_\_\_\_\_  
Notary Public for \_\_\_\_\_  
My Commission Expires: \_\_\_\_\_  
Notary (legal signature) \_\_\_\_\_  
Notary (printed name) \_\_\_\_\_

**This Consent and Waiver is effective as of the date sworn on this form. It may be revoked in writing by signing and notarizing form ABL-946R, or until the applicable permit or license is terminated or revoked.**

\_\_\_\_\_  
Principal's Signature

Name \_\_\_\_\_

Home Address (No PO Box) \_\_\_\_\_

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

Month/Date/Year of SC Residency \_\_\_\_\_ Date of Birth \_\_\_\_\_

SSN \_\_\_\_\_ FEIN \_\_\_\_\_

Principal Type (1-12; see page 1) \_\_\_\_\_ Percent of Ownership \_\_\_\_\_

Have you as an individual, or as an organization in which you were a principal, had revoked or suspended in this state or any other state any license to sell beer, wine, or alcoholic liquors?  
 Yes  No **If yes, you must attach an explanation.**

Have you been convicted of a crime in South Carolina or any other state?  
 Yes  No **If yes, you must attach an explanation.**

**SWORN to and subscribed before me this**  
\_\_\_\_\_ day of \_\_\_\_\_, year of \_\_\_\_\_  
Notary Public for \_\_\_\_\_  
My Commission Expires: \_\_\_\_\_  
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**This Consent and Waiver is effective as of the date sworn on this form. It may be revoked in writing by signing and notarizing form ABL-946R, or until the applicable permit or license is terminated or revoked.**

\_\_\_\_\_  
Principal's Signature



STATE OF SOUTH CAROLINA  
DEPARTMENT OF REVENUE  
**VERIFICATION OF LAWFUL PRESENCE IN THE  
UNITED STATES - APPLICANT AND PRINCIPALS**

**Each principal who is an individual must complete this form, as required by SC Code Section 8-29-10 and Title 61.**

The undersigned \_\_\_\_\_ of \_\_\_\_\_ ,  
Print clearly first, middle, and last name Home address (no PO boxes)  
\_\_\_\_\_ being first duly sworn deposes and states as follows:  
City, state, and ZIP

Name change/alias:  Yes  No **If yes, list:** \_\_\_\_\_

**Check ONLY one box:** See Instructions and Definitions for accepted documents. Principals must be at least 21 years old.

1. I am a **United States Citizen**.

2. I am a **Legal Permanent Resident**.

3. I am a **Qualified Alien** under the Federal Immigration and Nationality Act, Public Law 82-44.

4. I am a **Foreign Citizen**, and resident of \_\_\_\_\_  
Country of residency  
and reside at \_\_\_\_\_ , \_\_\_\_\_  
Street address City, state, and ZIP

5. Other (**Explain**): \_\_\_\_\_

\_\_\_\_\_ Date of Birth \_\_\_\_\_ Alien Registration Number

**MUST ATTACH A COPY OF ALL IMMIGRATION DOCUMENTS**

This affidavit must be completed by all principals or the license application will be denied. This affidavit will also apply during any renewal. Any change in immigration or citizenship status must immediately be reported to the SCDOR. Willfully making a false statement on this affidavit is a felony punishable by fines and/or imprisonment.

**Under penalty of perjury and recognizing that I am subject to the criminal and civil penalties imposed by Title 12 of the South Carolina Code of Laws, I declare that I have examined this Affidavit and to the best of my knowledge and belief, it is true, correct, and complete.**

\_\_\_\_\_  
Principal's Signature

**SWORN to and subscribed before me** this  
\_\_\_\_\_ day of \_\_\_\_\_, year of \_\_\_\_\_

Notary Public for \_\_\_\_\_

My Commission Expires: \_\_\_\_\_

Notary (legal signature) \_\_\_\_\_

Notary (printed name) \_\_\_\_\_

## Instructions and Definitions

### Check box 1 –

If you are a **US Citizen** by birth or naturalization.

### Check box 2 –

If you are a **legal permanent resident** and you are not a US citizen, but are residing in the US under legally recognized and lawfully recorded permanent residence as an immigrant.

**PROVIDE A COPY OF ALL IMMIGRATION DOCUMENTS.**

### Check box 3 –

If you are a **qualified alien**. You are a qualified alien if you are:

- an alien who is lawfully admitted for permanent residence under the INA;
- an alien who is granted asylum under Section 208 of the INA;
- a refugee who is admitted to the United States under Section 207 of the INA;
- an alien who is paroled into the United States under Section 212(d)(5) of the INA for a period of at least 1 year;
- an alien whose deportation is being withheld under Section 243(h) of the INA (as in effect prior to April 1, 1997) or whose removal has been withheld under Section 241(b)(3);
- an alien who is granted conditional entry pursuant to Section 203(a)(7) of the INA as in effect prior to April 1, 1980;
- an alien who is a Cuban/Haitian Entrant as defined by Section 501(e) of the Refugee Education Assistance Act of 1980;
- an alien who has been battered or subjected to extreme cruelty, or whose child or parent has been battered or subject to extreme cruelty.

**PROVIDE A COPY OF ALL IMMIGRATION DOCUMENTS.**

### Check box 4 –

If you are a nonimmigrant and you are an alien who seeks temporary entry to the US for a specific purpose. The alien must have a permanent residence abroad (for most classes of admission) and qualify for the nonimmigrant classification sought. The nonimmigrant classifications include: foreign government officials, visitors for business and for pleasure, aliens in transit through the US, treaty traders and investors, students, international representatives, temporary workers and trainees, representatives of foreign information media, exchange visitors, fiancé(e)s of US citizens, intracompany transferees, NATO officials, religious workers, and some others. Most nonimmigrants can be accompanied or joined by spouses and unmarried minors (or dependent) children.

**PROVIDE A COPY OF ALL IMMIGRATION DOCUMENTS.**

### Accepted Immigration Documents:

- Unexpired Foreign passport with I-551 stamp or attached INS Form I-94 indicating unexpired employment authorization
- Alien Registration Receipt Card with photograph (INS Form I-151 or I-551)
- Unexpired Temporary Resident Card (INS Form I-688)
- Unexpired Employment Authorization Card (INS Form I-688)
- Unexpired Reentry Permit (INS Form I-327)
- Unexpired Refugee Travel Document (INS Form I-571)
- Unexpired Employment Authorization Document issued by the INS which contains a photograph (INS Form I-688B)