

**Prevent All Cigarette Trafficking (PACT) Act  
Registration Form**

**Any person who sells, transfers, or ships for profit cigarettes or smokeless tobacco in interstate commerce, whereby such cigarettes or smokeless tobacco are shipped into a State, locality, or Indian country of an Indian tribe taxing the sale or use of cigarettes or smokeless tobacco or who advertises or offers cigarettes or smokeless tobacco for such a sale, transfer, or shipment shall first file with the Attorney General of the United States and with the tobacco tax administrators of the State and place into which such shipment is made, advertised, or offer is disseminated.**

**Section I - Principal Business Information**

1. Name of Person ( <i>See Definition #1</i> )		2. Name of Person (If an Individual) ( <i>Last, first, middle</i> )	
		Last	First   Middle
3. Trade Name(s)		4. Principal E-Mail Address	
5. Address of Principal Place of Business		6. Telephone Number for Principal Place of Business	7. Principal Website Address

**Section II - Additional Places of Business**

8a. Name of Additional Place of Business				9a. Website Address for Additional Place of Business	
10. Address of Additional Place of Business					
a. Street Address		City	State	Zip Code	11a. Telephone Number at Additional Location
8b. Name of Additional Place of Business				9b. Website Address for Additional Place of Business	
10. Address of Additional Place of Business					
b. Street Address		City	State	Zip Code	11b. Telephone Number at Additional Location
8c. Name of Additional Place of Business				9c. Website Address for Additional Place of Business	
10. Address of Additional Place of Business					
c. Street Address		City	State	Zip Code	11c. Telephone Number at Additional Location

**Section III - Agent Authorized to Accept Service**

12a. Name of Agent Authorized to Accept Service on Behalf of the Person ( <i>Person or Business Entity</i> )			
13a. Address of Authorized Agent		14a. Telephone Number of Authorized Agent	
12b. Name of Agent Authorized to Accept Service on Behalf of the Person ( <i>Person or Business Entity</i> )			
13b. Address of Authorized Agent		14b. Telephone Number of Authorized Agent	

**NOTE: In addition to registering with the Bureau of Alcohol, Tobacco, Firearms and Explosives, the PACT Act also requires a person to register with each State tobacco tax administrator in which the person sells and/or advertises cigarettes and/or smokeless tobacco products.**

## Definitions

1. **Person** - The term "person" means an individual, corporation, company, association, firm, partnership, society, State government, local government, Indian tribal government, governmental organization of such a government, or joint stock company.
2. **Indian Tribe** - The term "Indian tribe," "tribe," or "tribal," refers to an Indian tribe as defined in section 4(e) of the Indian Self-Determination and Education Assistance Act (25 U.S.C. 450b(e)) or as listed pursuant to section 104 of the Federally Recognized Indian Tribe List Act of 1994 (25 U.S.C. 479a-1).

## Instructions

1. Provide the name of the "person" registering. Please refer to the definition of "person" provided.
2. Provide the "Name of the Person" if an individual is the registrant.
3. Provide all trade names used by the Person.
4. Provide the principal e-mail associated with the Person.
5. Provide the address of the principal place of business.
6. Provide the telephone number for the principal place of business.
7. Provide the website for the principal place of business.
- 8a. Provide the name of the additional place of business (additional blocks are provided if needed).
- 9a. Provide the website address for the additional place of business (if any).
- 10a. Provide the address of the additional place of business.
- 11a. Provide the telephone number of the additional place of business.
- 12a. Name of the agent authorized to accept service on behalf of the person. This can be an individual or a business entity. The person must provide an agent or agents authorized to accept service in each of the states where the person does business. If there are multiple authorized agents, the person must list an authorized agent for each state in which the person does business. Please indicate which state(s) each agent covers in parentheses after their name. *Ex. Authorized Agent Inc., (New York)*. Additional blocks are provided if needed.
- 13a. Provide the address of the agent authorized to accept service.
- 14a. Provide the telephone number of the agent authorized to accept service.

NOTICE: Please use ATF Form 5070.1A, to report additional information needed to complete your registration in accordance with the PACT Act. ATF Form 5070.1A can be found at [www.atf.gov](http://www.atf.gov) under the Tobacco Diversion tab.

## Paperwork Reduction Act Notice

The information required on this form is in accordance with the Paperwork Reduction Act of 1995. The purpose of the information is to register delivery sellers of cigarettes and/or smokeless tobacco products with the Attorney General in order to legally continue to sell and/or advertise these tobacco products. The information is mandatory as required by P.L. 111-154.

The estimated average burden associated with this collection is 1 hour per respondent or recordkeeper, depending on individual circumstances. Comments about the accuracy of this burden estimate and suggestions for reducing it should be directed to Reports Management Officer, Document Services, Bureau of Alcohol, Tobacco, Firearms and Explosives, Washington, DC 20226.

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.