



# APPLICATION FOR EMPLOYEE PERMIT

State Form 43 (R23 / 7-24)  
Approved by State Board of Accounts, 2015

## INDIANA ALCOHOL AND TOBACCO COMMISSION

302 West Washington Street, Room E-114  
Indianapolis, IN 46204  
(317) 232-2430  
[www.in.gov/atc](http://www.in.gov/atc)

- INSTRUCTIONS:**
1. Type or print legibly.
  2. Include payment.
  3. Employee permits are valid for three (3) years from the date of issuance. Volunteer employee permits and restricted employee permits are valid for two (2) years from the date of issuance.
  4. If you have questions, please contact Employee Permits at (317) 232-2455 or [bartenders@atc.in.gov](mailto:bartenders@atc.in.gov).

\* This agency is requesting disclosure of your Social Security Number in accordance with IC 4-1-8-1. Disclosure is mandatory and this record cannot be processed without it.

### SECTION 1: GENERAL INFORMATION

Name of applicant (first, middle initial, last)		Telephone number	E-mail address
Mailing address (number and street, city, state, and ZIP code)			Permit number (if renewal)
Social Security Number *	Date of birth (mm/dd/yyyy)	Age	Sex <input type="checkbox"/> Male <input type="checkbox"/> Female
Driver license number / identification card number		State where driver license or identification card was issued	
Application type <input type="checkbox"/> Employee Permit (3-year) <input type="checkbox"/> Volunteer Permit (2-year) <input type="checkbox"/> Restricted Employee Permit (18-20-year-olds)			
Name and address of permit premises where employee permit will be used (if known): <hr/> <hr/>			
If you are applying for a Volunteer Employee Permit, please list the name and address of the not-for-profit organization you will be serving: <hr/> <hr/>			

### SECTION 2: BACKGROUND QUESTIONS

2.1.	Are you aware that you must successfully complete an approved server training course within 120 days of employment? (Not applicable for 18-20-year-old Restricted Employee Permit.)	<input type="checkbox"/> Yes <input type="checkbox"/> No
2.2.	Have you ever been convicted of operating a motor vehicle while intoxicated in Indiana or in any other state within the last ten (10) years? (If yes, please attach a letter with dates, court, conviction, and sentence information.)	<input type="checkbox"/> Yes <input type="checkbox"/> No
2.3.	Are you currently serving a sentence, including any term of probation, for operating a motor vehicle while intoxicated in Indiana or another state?	<input type="checkbox"/> Yes <input type="checkbox"/> No
2.4.	Do you have any outstanding or unpaid tax liabilities owed to the Indiana Department of Revenue? (If yes, you cannot have a permit until all liabilities have been paid.)	<input type="checkbox"/> Yes <input type="checkbox"/> No
2.5.	Have you ever had an alcoholic beverage permit or employee's permit denied, revoked, or suspended within the last five (5) years and/or have you received a violation in the last five (5) years? (If yes, please attach an explanation.)	<input type="checkbox"/> Yes <input type="checkbox"/> No
2.6.	Have you ever held a driver's license or state identification card in any state other than Indiana in the last ten (10) years? (If yes, you must attach a copy of your driving record from each state.)	<input type="checkbox"/> Yes <input type="checkbox"/> No
2.7.	Do you understand that an excise officer may enter, inspect, and search the permit premises in which you work without a warrant, and you must produce your employee permit on demand?	<input type="checkbox"/> Yes <input type="checkbox"/> No
2.8.	Do you understand that the alcoholic beverage laws are part of the criminal code and are enforceable by any law enforcement officer in the State of Indiana?	<input type="checkbox"/> Yes <input type="checkbox"/> No
2.9.	Do you understand that this employee permit is yours and that your employer is only allowed to copy your employee permit?	<input type="checkbox"/> Yes <input type="checkbox"/> No
2.10.	Do you know that it is a Class B Misdemeanor, punishable by up to six (6) months in jail and/or a \$1,000 fine, to knowingly serve or sell alcohol to an intoxicated person?	<input type="checkbox"/> Yes <input type="checkbox"/> No

**SECTION 3: RESTRICTED EMPLOYEE PERMITS**

To receive a Restricted Employee Permit, you must attach the original Certified Server Training Certificate issued to you at your training session. Photocopies will not be accepted.

**SECTION 4: FEE AND PAYMENT SCHEDULE**

Employee Permit – \$45.00  
Volunteer Employee Permit – \$15.00  
Restricted Employee Permit – \$30.00

Please note that employee permit fees are NON-REFUNDABLE.

Payment must be made in the form of a business check, certified check, or money order made payable to the Indiana Alcohol and Tobacco Commission.

**SECTION 5: SIGNATURE AND AFFIRMATION**

I certify that this application was completed by myself, and that all information provided herein and on any attachments is true and correct. I affirm under the penalties of perjury that I am at least eighteen (18) years of age. **I UNDERSTAND THAT IT IS A FELONY UNDER LAW TO MISREPRESENT OR FALSIFY ANY PORTION OF THIS APPLICATION OR ATTACHED DOCUMENTS.**

Signature of applicant

Date signed (mm/dd/yyyy)

**FOR OFFICE USE ONLY**

Operating while intoxicated (OWI) background check

No OWI       OWI Eligible       OWI Ineligible       No record on file

Date(s) of conviction(s) (mm/dd/yyyy)

Date eligible (mm/dd/yyyy)

Revealed  
 Yes     No

Initial

Date (mm/dd/yyyy)