



If this form is being completed for a new Iowa permit/license, complete form 70-015 (Annual Application for an Iowa Cigarette Permit/Tobacco License) and mail it with this form.

BOND

Bond Amount \$ _____

Bond No.: _____

Distribution or Sale of Cigarettes and/or Tobacco Products

This bond executed for: Cigarette Permit No. _____

Tobacco License No. _____

Principal is: _____

and

Surety Company is: _____

Name _____

Name _____

Address _____

Address _____

County _____

are held and firmly bound unto the State of Iowa in the penal sum of \$ _____ for the payment of which in Des Moines, Polk County, Iowa, we bind ourselves, our heirs, executors, administrators, and successors.

The conditions of the foregoing will be that the Principal will be/or was issued a permit/license in accordance with Iowa Code chapter 453A and shall observe and obey all the provisions of the Iowa Cigarette and Tobacco Products tax law, and shall pay all taxes, fines, penalties, damages and costs as provided in the said laws which may be assessed against the said Principal during the time of the continuance of the said permit/license.

This bond shall be effective for the permit/license year ending June 30, _____ and each successive permit/license year until canceled.

Authorized Signature Date

Authorized Signature Date

For Principal

Surety Company

approved by State of Iowa _____
Date

Bond Amount	for	Permit/License
\$5,000		Cigarette Manufacturer
\$3,500		Cigarette and Tobacco Distributor
\$2,500		Cigarette Distributor, Wholesaler, Distributing Agent
\$1,000		Cigarette Vendor, Tobacco Distributor
\$ 500		Railway Car Retailer

Note: Surety on this bond must be a surety company authorized to do business in Iowa and approved as to its solvency by the Insurance Commissioner.

The notice for relief from liability by the bonding company shall be by Certified Mail.

Mail this form to Examination Section, Iowa Department of Revenue,
PO Box 10456, Des Moines Iowa 50306-0456.