



**State of Arizona**  
**United States Importer Declaration**  
**Accepting Joint And Several Liability**

**Statutory Requirements**

Pursuant to A.R.S. § 44-7111(3)(h), a Non-Participating Manufacturer ("NPM") located outside of the United States must provide a declaration from each of its Importers to the United States of any of its Brand Families that such Importer accepts joint and several liability with the NPM for all escrow deposits due pursuant to § 44-7101 as well as all penalties and other relief available to the State of Arizona pursuant to A.R.S. §§ 44-7101 and 44-7111. The declaration shall appoint a Resident Agent for service of process in Arizona pursuant to A.R.S. § 44-7111(4). The declaration must be updated at least thirty days before any other Importer begins the importation of the manufacturer's cigarettes. The declaration shall be submitted as part of the initial, annual, and supplemental certifications required by A.R.S. § 44-7111. Please be aware that failure to comply with A.R.S. § 44-7111(3)(h) is grounds for removal from the Arizona Cigarette Directory. For the purposes of this subparagraph, "Importer" has the same meaning as in 27 C.F.R. § 41.11 (2012).

**Importer Information**

Importer Name: \_\_\_\_\_  
 Contact Name and Title: \_\_\_\_\_  
 Contact Mailing Address: \_\_\_\_\_  
 Contact Phone Number: \_\_\_\_\_ Contact Fax Number: \_\_\_\_\_  
 Contact E-mail Address: \_\_\_\_\_  
 Importer Federal Taxpayer ID Number: \_\_\_\_\_

**Non-Participating Manufacturer Identification**

Importer declares that it is a United States Importer for the following NPM. *(Please identify below the foreign NPM whose products you import into the United States).*

Manufacturer Name: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_  
 Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_  
 E-Mail Address: \_\_\_\_\_

**Importer's Resident Agent for Service of Process**

\_\_\_\_\_ hereby appoints \_\_\_\_\_ as  
 (Importer) (Resident Agent)

its Resident Agent for service of process on its behalf, recognizing that proper service on the Agent constitutes legal and valid service of process on itself.

Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Print Name: \_\_\_\_\_ Title: \_\_\_\_\_

**Resident Agent Identification**

Resident Agent Name: \_\_\_\_\_  
 Street and Number *(Must be in Arizona State)*: \_\_\_\_\_  
 P.O. Box *(Optional – Must be in same city as street address)*: \_\_\_\_\_  
 City: \_\_\_\_\_, AZ Zip: \_\_\_\_\_  
 Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_  
 E-Mail Address: \_\_\_\_\_

**Resident Agent's Declaration**

I consent to serve as Resident Agent in the State of Arizona for the above-named Importer, pursuant to A.R.S. § 44-7111(4). I understand it shall be my responsibility to accept service of process for the Importer regarding any action or proceeding against it, and that I may be

