



WYOMING LIQUOR DIVISION
6601 Campstool Road
Cheyenne, Wyoming 82002-0110
Phone (307) 777-7233
Fax (307) 777-6255



MEMORANDUM

TO: All WLD Customers
FROM: Wyoming Liquor Division
SUBJECT: Management Account Access Form Instructions

The following instructions pertain to the manager authorization form WLD-120MAA.

1. Complete the top portion of the form. This section identifies your specific establishment.
2. To authorize a manager, use the top portion of the form.
3. Print the name of the manager on the left side of the form.
4. The manager must sign on the right side of the form next to the printed name.
5. To add additional managers, a new form must be completed for each manager.
6. To remove a manager, please submit a written request, signed and dated, to our office.
7. To authorize other employees account access, use the bottom of the form.
8. Print the name of the authorized individual on the left side of the form.
9. The individual sign on the right side of the form next to the printed name.
10. **Only the owner(s), member(s) of the LLC or officer(s) of the corporation or club holding the liquor license will be allowed to authorize a Manager or individuals for Account/Eliquor Access.**
11. Think of this as a signature card at a bank, only those individuals on file will be allowed to order. This requirement is a safeguard for you, the licensee.



MANAGEMENT ACCOUNT ACCESS

WYOMING LIQUOR DIVISION

6601 Campstool Road

Cheyenne, Wyoming 82002-0110

PHONE (307) 777-7233 FAX (307) 777-6255

Customer #: _____

Date: ____/____/____

Licensee Name: _____
(Applicant)

D/B/A: _____
(Doing Business As)

Location City: _____

AUTHORIZATION OF MANAGER

Manager will be authorized to request account information and add/remove personnel authorized to place orders.

(Manager Printed Name-Required)

(Manager Signature-Required)

(Owner/Officer Authorization Printed- Required)

(Owner/Officer Authorization Signature- Required)

Changes to authorized managers can only be made by owner(s) or officer(s) who are listed on the liquor license application.

A new form is required if there is a change of manager.

Please notify us immediately in writing if current manager is no longer authorized.

Account/Eliquor Access

Will allow access to account information.

(Printed Name-Required)

(Signature-Required)

(Owner/Officer Authorization Printed- Required)

(Owner/Officer Authorization Signature- Required)

WLD OFFICE USE ONLY:

ACCOUNTING: EPICOR: _____ DATE: ____/____/____ COMPLIANCE: DB / ELIQUOR: _____ DATE: ____/____/____