

ISLD Special Order Menu Request Instructions:

Dear Valued Licensee Account Representative,

We have developed the attached form to allow our team to fulfill Special Order Items requested to support your on premise menu promotions that feature Special Order products. **Submissions are required to be submitted 90 days in advance of the promotion activation date.** This will allow enough time to confirm pricing, order and mitigate any logistical supply constraints.

- Please complete the attached form with all details asked and return to **SpecialOrders@liquor.idaho.gov**
- You must include the total forecast needed each month If you have multiple locations with the same need and pickup at different ISLD store location, please submit a separate form for that location.
- Only include Special Order Items currently listed as a Special Order with ISLD. A current list of Special Order items can be requested from your store manager or found on <u>Idaho State Liquor Division Product Listing</u>.
- If any changes take place during the promotional period, including but not limited to an increase in forecast, extension or shortened promotional period, etc. please inform specialorders@liquor.idaho.gov so we can take appropriate actions.

Once you submit your form, we will confirm the availability of the item(s) with the supplier. We will return the form with confirmed information and begin processing your request to ensure we have enough inventory to support your promotion.

We will track your forecast and promotional period and inform stores of your needs at the beginning of each month. Stores will order the inventory for your account based on the information we receive.

All Special Order items are sold by the case. Licensees are required to purchase all Special Order inventory requested in the Forecast. Unused inventory of Special Order items will not be refunded.

If you have a Special Order Inquiry – for an item not currently listed with ISLD, please submit your request within your store and they will submit the New Special Order Inquiry for review. Once confirmed, we will communicate that the item is now in our system. You will be responsible for submitting an additional form to include it on your Special Order Menu Request. Special Order New Inquiries may exceed the 90 day timeframe.



ISLD Use:

FORM RECEIVED:_____(Date)_____ BY:_____(Name)_____

ISLD Special Order Menu Request

Send completed form to: specialorders@liquor.idaho.gov

Account Name:

Account Primary Contact Name:

Account DSN:

Account Primary Contact Email:

Account Primary Contact Phone:

ISLD Store # Pick up (Drop Down):

| NABCA | Size | Product Name | Forecast (cases needed per month) | Program Start Date | Program End Date | Availability Confirmed (ISLD use) | Comments (ISLD use) |
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