



Bureau of Alcoholic Beverages
Division of Liquor Licensing & Enforcement
8 State House Station
Augusta, ME 04333-0008
Tel: (207) 624-7220 Fax: (207) 287-3434

NOTICE

To avoid any delay in the processing of your application and issuance of your liquor license, please make sure that:

1. You completed the application in full.
2. Application is signed by the owner (s), Corporate Officer
3. The license fee is correct and you have included the \$10.00 filing fee.
4. A diagram of the premises to be licensed accompanies the application. (For new applications only)
5. If business is located in an unorganized township. The application must be approved by the County Commissioners and the \$10.00 filing fee paid to them.
6. Limited Liability Companies, Limited Partnerships and Corporations must complete and submit the Supplemental Information for Business Entities.
7. If not a publicly traded entity, ownership must add up to 100%.



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Present License Expires _____

BUREAU USE ONLY

LICENSE # ASSIGNED:
Class:
Deposit Date:
Amt. Deposited:

- Off-Premise Retailer – Malt Liquor \$200.00
- Off-Premise Retailer – Table Wine \$200.00
- Filing Fee \$ 10.00

NOTE: if the place of business is located in an unincorporated place, the County Commissioners must approve the application. All such applications shall be accompanied by receipt of payment of the \$10.00 filing fee to the County Treasurer.

Check Payable: Treasurer State of Maine

ALL QUESTIONS MUST BE ANSWERED IN FULL

1. APPLICANT(S) –(Sole Proprietor, Corporation, Limited Liability Co., tc.) DOB: DOB: DOB: Address City/Town State Zip Code Telephone Number Fax Number Federal I.D. #	2. Business Name (D/B/A) Location (Street Address) City/Town State Zip Code Mailing Address City/Town State Zip Code Business Telephone Number Fax Number Seller Certificate #
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3. List of Wholesale Value and Types of Merchandise in inventory: **(Must be answered)**

Edible Foods \$ _____ Tobacco Products \$ _____ Paper Goods \$ _____
 Greeting Cards, Magazines, Newspapers \$ _____ Total of all other merchandise in inventory \$ _____

4. Is applicant a Corporation, Limited Liability Co. or Limited Partnership: Yes ڤ No ڤ (If Yes complete Corporate Questionnaire)

5. If manager is to be hired give name _____

6. If business is NEW indicate opening date: _____ Business Hours: _____

7. Is/Are applicant(s) citizens of the United States? Yes No

8. Is/Are applicant(s) residents of the State of Maine? Yes No

9. List name, date of birth, place of birth for all applicants and managers. Give maiden name, if married:

Name in Full (<i>Print Clearly</i>)	DOB	Place of Birth

Residence address on all of the above for previous 5 years (Limit answer to city & state)

Use a separate sheet of paper if necessary.

10. Has applicant(s) or manager(s) ever been convicted of any violation of the law, other than minor traffic violations of any State of the United States? Yes No

Name: _____ Date of Conviction: _____

Offense: _____ Location: _____

Disposition: _____

11. Will any law enforcement official benefit financially either directly or indirectly in our license, if issued?

Yes No If Yes, give name: _____

12. Has applicant(s) formerly held a Maine liquor license? Yes No

13. Do applicant(s) own the premises? Yes No If No, give name and address of owner: _____

14. Describe in detail where liquor will be stored: (Supplemental On/Off Premise Diagram Required) _____

15. Have you received any assistance financially or otherwise (including any mortgages) from any source other than yourself in the establishment of your business? Yes No If Yes, give details: _____

16. Does any other person have any interest directly or indirectly in your business? Yes No If Yes, give details: _____

PAYMENTS TO THE DIVISION OF LIQUOR LICENSING & ENFORCEMENT BY CHECK SUBJECT TO
PENALTY PROVIDED BY SECTION 3 OF TITLE 28A, MAINE REVISED STATUTES

NOTE: "I understand that false statements made on this form are punishable by law. Knowingly supplying false information on this form is a Class D offense under the Criminal Code, punishable by confinement of up to one year or by monetary fine of up to \$500.00 or by both."

Dated at: _____ on _____, 20____
City/Town Date Year

Signature(s) of Applicant(s) or Corporate Officer(s)

Print Name of Applicant(s) or Corporate Officer(s)



State of Maine
Bureau of Alcoholic Beverages
Division of Liquor Licensing and
Enforcement

For Office Use Only:
License #: _____
Date Filed: _____

**Supplemental Information Required for Business
Entities Who Are Licensees**

For information required for Questions 1 to 4, this information is on file with the Maine Secretary of State's office and must match their record information. Please clearly complete this form in its entirety.

1. Exact legal name:

2. Other business name for your entity (DBA), if any:

3. Date of filing with the Secretary of State: _____

4. State in which you are formed: _____

5. If not a Maine business entity, date on which you were authorized to transact business in the State of Maine: _____

6. List the name and addresses for previous 5 years, birth dates, titles of officers, directors and list the percentage ownership: (attached additional sheets as needed)

Name	Address for Previous 5 years	Date of Birth	Ownership %

7. Is any principal person involved with the entity a law enforcement official?

Yes No

8. If Yes to Question 7, please provide the name and law enforcement agency:

Name: _____ Agency: _____

9. Has any principal person involved in the entity ever been convicted of any violation of the law, other than minor traffic violations, in the United States?

Yes No

10. If Yes to Question 9, please complete the following: (attached additional sheets as needed)

Name: _____

Date of Conviction: _____

Offense: _____

Location of Conviction: _____

Disposition: _____

Signature:

Signature of Duly Authorized Person

Date

Print Name of Duly Authorized Person

If you have questions regarding the legal name or assumed (DBA) name on file with the Secretary of State's office, please call (207) 624-7752. The SOS can only speak to the information on file with their office, not the filing of this supplemental information – please direct any questions about this form to our office at the number below.

Submit Completed Forms To: Bureau of Alcoholic Beverages and Lottery
Operations Division of Liquor Licensing Enforcement
8 State House Station Augusta, Me 04333-0008
Telephone Inquiries: (207) 624-7220
Fax: (207) 287-3434
Email Inquiries: MaineLiquor@Maine.gov