

STATE OF MAINE DEPARTMENT OF ADMINISTRATIVE AND FINANCIAL SERVICES BUREAU OF ALCOHOLIC BEVERAGES AND LOTTERY OPERATIONS DIVISION OF LIQUOR LICENSING AND ENFORCEMENT

Application for Small Brewery

Division U	se Only
License No:	
Class:	By:
Deposit Date:	
Amt. Deposited:	
Payment Type:	

For Annual Malt Liquor Production under 30,000 barrels (930,000 gallons)

All Questions Must Be Answered Completely. Please print legibly.

Section I: License Status and Information

- 1. New license or renewal of existing license? \Box New \Box Renewal
- 2. If a renewal, please provide the following information; if a new license, skip to Section II:
 - a. Current license expiration date:
 - b. Number of gallons produced during most recent licensure period:

Section II: Licensee/Applicant(s) Information

Legal Business Entity Applicant Name (corporation, LLC):	Business Name (D/B/A):
Individual or Sole Proprietor Applicant Name(s):	Physical Location:
Individual or Sole Proprietor Applicant Name(s):	Mailing address, if different:
Mailing address, if different from DBA address:	Email Address:
Telephone # Fax #:	Business Telephone # Fax #:
Federal Tax Identification Number:	Maine Seller Certificate # or Sales Tax #:
Federal Basic Permit Number:	Website address:

- 1. Is licensee/applicant(s) a business entity like a corporation or limited liability company? □ Yes □ No If **Yes**, complete Attachment 1 at the end of this application
- 2. Business records are located at the following address:
- 3. Do you own or have any interest in any another Maine Liquor License? \Box Yes \Box No

If yes, please list license number, business name, and complete physical location address: (attach additional pages as needed using the same format)

Name of Business	License Number	Complete Physical Address

4. List name, date of birth, place of birth for all applicants including any manager(s) employed by the licensee/applicant. Provide maiden name, if married. (attach additional pages as needed using the same format)

	Full Name	DOB	Place of Birth
Residence address on al	ll of the above for previous 5 years		
Name	Address:		
NT	A 11		
Name	Address:		
Name	Address:		
Name	Address:		
		_	
5. Is the licensee/applic	ant(s) citizens of the United States?	□ Y	es 🗆 No

6. Is the licensee/applicant(s) a resident of the State of Maine?

No

Yes

7.	manager,	shareh	older or	partne	r have i	n any way an i	ted in Section I, does any officer, director, member, neterest, directly or indirectly, in their capacity in the wholesaler license granted by the State of Maine?
		Yes		No		Not applicable	e – licensee/applicant(s) is a sole proprietor
8.		ial assis	-	. ,	•		id or assistance in the form of money, property, credit, siness entity holding a liquor license granted by the
9.		Yes		No			cially from this license, if issued? partment where employed:
10	State of t	he Unit	ed State	s?		Yes 🗆	y violation of the liquor laws in Maine or any No d attach additional pages as needed using the
Na	me:						Date of Conviction:
Of	fense:						Location:
Di	sposition:						
11						n convicted of United States?	any violation of any law, other than minor traffic \Box Yes \Box No
		s, pleas format.	-	le the fo	ollowing	g information ar	d attach additional pages as needed using the
Na	.me:						Date of Conviction:
Of	fense:						Location:
Di	sposition:						

Section III Manufacturing Facility Floor Plan

In an effort to clearly define your license premise and the areas that consumption and storage of malt liquor is allowed, the Bureau requires all applications to include a diagram of the premise to be licensed.

Diagrams should be submitted on this form and should be as accurate as possible. Be sure to label the following areas: entrances, office area, coolers, storage areas, display cases, shelves, restroom, point of sale area, area of manufacturing, area of retail sales, area for on-premise consumption, outside area/decks or any other areas on the premise that you are requesting approval. Attached an additional page as needed to fully describe the premise.

Section IV: Terms and Conditions of Licensure as a Brewer in Maine

- The licensee/applicant(s) agrees to be bound by and comply with the laws, rules and instructions promulgated by the Bureau.
- The licensee/applicant(s) agrees to maintain accurate records related to a license to be a brewer as required by the law, rules and instructions promulgated or issued by the Bureau if a license is issued as a result of this application.
- All manufacturers of alcoholic beverages must be registered with the Alcohol and Tobacco Tax and Trade Bureau (TTB). If you have not already registered, please see TTB.gov for more information to register your business or see https://www.ttb.gov/public_info/5170-2a.htm
- Any change in the licensee's/applicant's licensed premises as defined in this application must be approved by the Bureau in advance.
- A wholesale licensee must not purchase alcoholic beverages from other than the primary source of supply within the United States. "Primary sources of supply" means the brewer, the bottler, the brand owner or the designated agent of any brewer or brand owner.
- The licensee/applicant(s) agrees to comply with <u>28-A MRS §1363</u> which provides, in part, that a manufacturer shall not, either directly or indirectly, lend any money, credit or equivalent thereof to any wholesaler in equipping, filling out, maintaining or conducting, either in whole or in part, an establishment of business where malt liquor, wine or spirits are sold, with the exception of the usual and customary credit of malt liquor, wine or spirits sold and delivered.
- All manufacturers must register product with the Bureau prior to selling their product in this State.
 - If this application is a <u>renewal</u> of your license, you must renew all product using <u>Alcoholic</u> <u>Beverage Industry Portal</u> on our website. There are some exceptions to this registration requirement, for more information, see <u>Chapter 105</u>, <u>Product and Label Registration</u> of the Bureau's administrative rules.
 - For new applicants, the registration has 4 components product registration that includes your TTB COLA, territory assignment, primary source designation and price posting. Once a manufacturer is ready to sell, you must contact the Bureau at <u>Liquor.Licensing@Maine.gov</u> to have an account created to register your products. The <u>Maine Alcoholic Beverage Industry Portal</u> can be found by using this link.

Section V: Signature; Fee; Delivery of application

By signing this application, the licensee/applicant understands that false statements made on this application are punishable by law. Knowingly supplying false information on this application is a Class D Offense under Maine's Criminal Code, punishable by confinement of up to one year, or by monetary fine of up to \$2,000 or by both.

Please sign and date in blue ink.

Dated: _____

Signature of Duly Authorized Person

Signature of Duly Authorized Person

Printed Name Duly Authorized Person

Printed Name of Duly Authorized Person

- A. Your completed application must be accompanied by the appropriate fees of <u>\$60.00</u> which includes a \$50.00 application fee and a \$10.00 filing fee. Optional fees include a \$75.00 Farmers' Market Participation fee and \$600.00 for an additional warehouse storage location that is renewable annually. If you opt to add either of these options, please adjust your payment to reflect the additional fees.
 - 1. Please make your check payable to the **Treasurer**, **State of Maine**
- B. Where to send your application:
 - 1. Mailing address:

Bureau of Alcoholic Beverages and Lottery Operations Division of Liquor Licensing and Enforcement

8 State House Station

Augusta, ME 04333-0008

- Courier/overnight address:
 Bureau of Alcoholic Beverages and Lottery Operations Division of Liquor Licensing and Enforcement 19 Union St, 3rd Floor
- Augusta, ME 04330 C. For questions on this application, please contact the Bureau at (207) 624-7220 or by email at Liquor.Licensing@Maine.gov.

Attachment 1 Required Additional Information for a Brewer's Licensee/Applicant(s) Who are Legal Business Entities

Questions 1 to 4 of this part of the application must match information in Section II of the application above and match the information on file with the Maine Secretary of State's office. If you have questions regarding your legal entity name or DBA, please call the Secretary of State's office at (207) 624-7752.

All Questions Must Be Answered Completely. Please print legibly.

- 1. Exact legal name:
- 2. Doing Business As, if any:
- 3. Date of filing with Secretary of State: ______ State in which you are formed: ______
- 4. If not a Maine business entity, date on which you were authorized to transact business in the State of Maine:
- 5. List the name and addresses for previous 5 years, birth dates, titles of officers, directors, managers, members or partners and the percentage ownership any person listed: (attached additional pages as needed)

Name	Address (5 Years)	Date of Birth	Title	Percentage of Ownership

(Stock ownership in non-publicly traded companies must add up to 100%.)

Farmers' Market Schedule

The following is Notification to the Bureau of date of the farmers' market that the licensee intends to taste and/or sell malt liquor that is produced in Maine by the licensee. The notification must be received by the Bureau 30 days prior to the first event for each farmers' market. This form needs to be completed for each farmers' market the licensee intends taste and/or sell its products. Note: This form does not need to be submitted with the application. For more information from Maine law on activities at farmers' market, see Sec. 6 of PL 2019, chapter 360.

License #: Name of Licensee:	Name of the farmers' Market:
Email/Fax Number/Mailing Address to send Response by the Bureau:	Address of the farmers' market:
Signature of duly authorized person:	Date:

Please check *A* all that apply for the given date of the farmers' market (attach additional pages if needed)

	DATE	RETAIL	TASTING		DATE	RETAIL	TASTING
		SALES				SALES	
		ONLY				ONLY	
1				11			
2				12			
3				13			
4				14			
5				15			
6				16			
7				17			
8				18			
9				19			
10				20			

For Office Use Only:

Date Filed:

 \Box Approved \Box Not Approved

Date Approved: _____

Approved By: _____