



**BUREAU OF ALCOHOLIC BEVERAGES AND  
 LOTTERY OPERATIONS**  
**Division of Liquor Licensing & Enforcement**  
**8 State House Station, Augusta, ME 04333-0008**  
**Phone: (207) 624-7220 or Fax: (207) 287-3434**

<b>DIVISION USE ONLY</b>	
License No:	
Class:	By:
Deposit Date:	
Amt. Deposited:	
Cash Ck Mo:	

**QUALIFIED CATERING  
 SELF SPONSORED APPLICATION**

Make check payable for \$700.00 to Treasurer State of Maine

Corporation Name:	Business Name (D/B/A)
<b>APPLICANT(S)</b> (Sole Proprietor) <b>DOB:</b>	<b>Physical Location:</b>
<b>DOB:</b>	<b>City/Town    State      Zip Code</b>
<b>Address</b>	<b>Mailing Address</b>
<b>City/Town    State      Zip Code</b>	<b>City/Town    State      Zip Code</b>
<b>Telephone Number    Fax Number</b>	<b>Business Telephone Number    Fax Number</b>
<b>Federal I.D. #</b>	<b>Seller Certificate #: or Sales Tax #:</b>
<b>Email Address: Please Print</b>	<b>Website:</b>

1. Do you currently have a Qualified Caters License?

Yes  License #: \_\_\_\_\_ Expiration date: \_\_\_\_\_

No  You must also complete the On-Premise License Application.

Dated at: \_\_\_\_\_ on \_\_\_\_\_, 20\_\_\_\_

City / Town Day Year

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

\_\_\_\_\_  
Printed Name(s) of Applicant(s) or Corporate Officer

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

\_\_\_\_\_  
Printed Name(s) of Applicant(s) or Corporate Officer