

ADDITIONAL LICENSE/PERMIT APPLICATION

SECTION 1: Licensee(s) Information

1. License Number

2. Licensee's Name (If an individual: first name, middle name, last name. If a corporation, limited partnership, or limited liability company: name of entity)

3. Doing Business As (DBA)

4. Licensed Premises Address

5. Business Mailing Address

6. Licensee's Phone Number

7. Licensee's Email Address

SECTION 2: Application for Permit/License

8. Additional Permit or [License Type](#) Requested

- | | |
|--|--|
| Beer & Wine Importer (Type 09) | Duplicate (Type 47) - Quantity: _____ |
| Beer Manufacturer Caterer's Permit (Type 91) | Duplicate (Type 48) - Quantity: _____ |
| Brandy Importer (Type 11) | Estate Tasting Event Permit (Type 93) |
| Caterer's Permit (Type 58) | Event Permit (Type 77) |
| Certified Farmer's Market – Wine (Type 79) | Portable Bar (Type 68) - Quantity: _____ |
| Certified Farmer's Market – Beer (Type 84) | Still (Type 06) - Quantity: _____ |
| Controlled Access Cabinet (Type 66) | Wine Sales Event Permit (Type 81) |
| Distilled Spirits Importer (Type 12) | Other: _____ |

SECTION 3: Signature (only one signature required)

9. Certification for Signature of a Licensed Principal

I declare under penalty of perjury that I am authorized to sign for licensed entity identified in Item 2, above. I have read the foregoing and know the contents thereof.

| | | |
|-----------|------------------------|------|
| Signature | Printed Name and Title | Date |
|-----------|------------------------|------|

FOR ABC USE ONLY

| | | | | | |
|----------------|----------------|---------------|------|---------------|----------|
| Receipt Number | Fee Paid \$ | Copies Mailed | Date | District Code | Geo Code |
|----------------|----------------|---------------|------|---------------|----------|

New License Number (if applicable, Type 79 and 84)

| | | |
|----------------|--|-------------|
| Recommendation | ABC Employee Signature (if investigation required) | Date Signed |
|----------------|--|-------------|

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|----------------|------------------------|-------------|
| Recommendation | Supervisor's Signature | Date Signed |
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