

## Application for a Change in Class from a Brewer to a Farm Brewer License

The Farm Brewer license authorizes the licensee to operate a brewery for the manufacturing of New York State labeled beer and New York State labeled cider.

No Farm Brewery shall manufacture in excess of 60,000 finished barrels of beer annually.

Submit a check or money order in the amount of **\$884**, payable to the New York State Liquor Authority.

**Mail completed application to:  
New York State Liquor Authority  
Church Street Station,  
PO Box 3817  
New York, NY 10008-3817.**

Serial Number  County  Telephone #

Full Name of Licensee as listed on the License

Trade Name (DBA) as listed on the License Certificate

Complete Address of Licensed Premises including Zip

Post Office/Mailing Address, if different than premises

FEIN#

Name of Contact   Attorney  Representative  Contact

Office Address

City  State  Zip Code

Telephone Number of Office (Include Area Code)

E-mail Address (if available)

*Submit a completed Notice of Appearance*

1. Have you made any physical changes to the licensed premises to accommodate a Farm Brewery license?  Yes  No

If yes, submit an amended Premises Questionnaire, diagrams and photos of the brewery.

2. All applicants are required to complete the Applicant's Statement, enclosed.

Once the application has been approved, you will be required to surrender your Brewer's license.

OFFICE USE ONLY

\_\_\_\_\_  
Approved or Disapproved

\_\_\_\_\_  
License Board Member

\_\_\_\_\_  
Date

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## APPLICANT'S STATEMENT

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I, [print name] \_\_\_\_\_

( the  sole proprietor ,  partner ,  corporate principal or  LLC/LLP member )  
 understand that the State Liquor Authority will rely on each and every answer in the application and accompanying documents in reaching its determination and state, under penalty of perjury, that all statements and representations therein are true to the best of my knowledge and belief; and

I state that the location and description of the premises to be licensed does not violate any requirement of the ABC law or other state or local ordinances; and

I understand that if any change occurs in the information provided to the Authority in the application, the licensee must notify the Authority by certified mail within 48 hours and if any change occurs after receipt of the license, the licensee must notify the Authority by certified mail within 10 days. I understand that failure to give such notice may result in disapproval of the application or revocation or non-renewal of any license for which this application is submitted; and

I understand that the licensee will be bound by the statements and representations made in the application, including, but not limited to the licensee's method of operation and the identity of persons with an ownership or financial interest in the licensed premises; and that all statements and representations made become conditions of the license; and

I understand that any physical alterations to, or changes to the size of the area used for the sale and consumption of alcoholic beverages, must be reported to the Authority and may require the approval of the Authority; and

I understand that the licensee must keep the Authority advised of any change in the mailing addresses of the licensee, the licensee's principals, and the licensee's landlord.

I understand that the licensee's failure to operate the licensed premises in accordance with the statements and representations made in the application may result in revocation of any license for which the application was submitted; and

I understand that any false statement or misrepresentation will constitute cause for disapproval of the application or revocation or non-renewal of any license for which this application is submitted.

\_\_\_\_\_  
 Signature

\_\_\_\_\_  
 Date

## PREMISES QUESTIONNAIRE

**1. Describe the area where the premises is to be located:**     Residential     Business     Shopping Mall

**1a. State what the area is zoned for:**   
(ie. Residential, Business, Mixed)

### 2. Premises

Describe in detail the building(s) in which the  
a. premises will be located and list the number of floors  
in the building.  
(ie. : Entire building, office space - include suite number)

b. Has the building/premises been known by any other address?     YES     NO

If YES, please specify:

c. Has the premises to be licensed and/or any other floor in the building been  
previously licensed or currently licensed to traffic in alcoholic beverages?     YES     NO

d. What was prior use of premises to be licensed?

e. Does the proposed location of the business comply with all state and local  
regulations and zoning codes?     YES     NO

f. Is there interior access to any other floor(s) that will not be part of the licensed premises?     YES     NO

If YES, list floor(s) and means of access to each floor(s).  
(ie: stairs, elevator, etc. - must be shown on diagram)  
List use of floor(s). (ie: apartments, offices, etc.)

g. Does any other person have access to this area?     YES     NO

h. If applying for a Farm Winery License ,the premises **must be** located on a farm. In the box below, provide a detailed description of the premises and location of the vineyard in relation to the production site and location of a restaurant on or adjacent to the premises. **(Unless applying for a Farm Winery license, you must apply for a separate license if you have a restaurant for on premises consumption on or adjacent to the premises to be licensed.)** (Provide additional sheets if necessary.)

continued on next page