

OFFICE USE ONLY		
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LICENSE

APPLICATION FOR RESTAURANT-BREWER LICENSE (MR 210)

Applicants for the Restaurant-Brewer license are advised of the following per Section 64(c) of the ABC Law:

- No person may have an interest in more than 5 Restaurant-Brewer licenses.
- No more than 5,000 barrels of beer per year may be brewed on any Restaurant-Brewer licensed premises.
- Persons holding multiple Restaurant-Brewer licenses are not permitted to brew, in the aggregate, more than 20,000 barrels per year.
- A Restaurant-Brewer licensee may apply for a Restaurant-Brewer Supplemental license (MR 910). See the Restaurant-Brewer Supplemental license application for more information on this supplemental license.
- The Restaurant-Brewer is required to comply with all provisions of the ABC Law applicable to on-premises liquor licenses (including community board/municipality notification and 200' and 500' laws).

Applicants MUST submit the following items along with this application:

The completed Retail On-Premises application along with all supporting documentation requested in the application.

A surety bond in the amount of \$2,000

Copy of the Brewer's Notice from the Federal Bureau of Alcohol, Tobacco and Firearms (TTB)

A detailed written statement explaining your planned method of operation in terms of the brewery functions at the premises. Describe the production method you will use to make your beer. Include the quantity you intend to produce annually and who you intend to sell your product to.

See the Retail Fee Schedule for the total fee due for a Restaurant-Brewer License (MR 210)

Mail To: New York State Liquor Authority, Church Street Station, PO Box 3817, New York, NY 10008-3817

Name of Licensee:

Trade Name(DBA):

Premises Street Address:

City: , **NY** Zip Code:

County: Telephone Number of Premises (include area code):

Mailing Address (if different than above):

City: State: Zip Code:

E-mail address :

I certify that I intend to comply with all provisions of Section 64-c of the ABC Law.

Signature of Applicant Principal:

Printed Name of Applicant Principal:

Title of Applicant Principal: Date:

[OFFICE USE ONLY]	
DATE FILED: <input type="text"/>	SERIAL #: <input type="text"/>

OFFICE USE ONLY: Approved Disapproved By: _____ Date: _____