

(ABC Use Only)

LICENSE NUMBER	
RECEIPT NUMBER	
FEE PAID	
\$	
DISTRICT CODE	GEO CODE

SECTION 1 - LICENSEE INFORMATION

1. LICENSEE'S NAME	2. DOING BUSINESS AS (DBA)	3. DATE
4. PROPOSED PREMISES ADDRESS		5. DISTRICT OFFICE
6. MAILING ADDRESS		7. LICENSEE'S PHONE NUMBER ()

SECTION 2 - APPLICATION FOR PERMIT/LICENSE

8. TYPE OF PERMIT/LICENSE	9. NUMBER OF PERMITS/LICENSES	10. PRINCIPAL/MASTER LICENSE NUMBER
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I/We apply for the permit/license(s) checked below.

- | | |
|--|---|
| <input type="checkbox"/> a. Caterer's Permit (Type 58) | <input type="checkbox"/> g. Duplicate (Type 02) |
| <input type="checkbox"/> b. Controlled Access Cabinet (Type 66) | <input type="checkbox"/> h. Duplicate (Type 47) |
| <input type="checkbox"/> c. Portable Bar (Type 68) | <input type="checkbox"/> i. Duplicate (Type 48) |
| <input type="checkbox"/> d. Beer & Wine Importer (Type 09) | <input type="checkbox"/> j. Event Permit (Type 77) |
| <input type="checkbox"/> e. Brandy Importer (Type 11) | <input type="checkbox"/> k. Certified Farmer's Market (Type 79) |
| <input type="checkbox"/> f. Distilled Spirits Importer (Type 12) | <input type="checkbox"/> l. Other _____ |

SECTION 3 - SIGNATURE

(Only one signature required. Extra line provided for your convenience if your entity requires two signatures.)

11. CERTIFICATION FOR SIGNATURE OF A LICENSED PRINCIPAL

I declare under penalty of perjury that I am authorized to sign for the licensed entity identified in Item 1, above. I have read the foregoing and know the contents thereof. Signature must be notarized unless witnessed by ABC employee.

12. SIGNATURE	13. PRINTED NAME AND TITLE	14. DATE SIGNED

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RECOMMENDATION	INVESTIGATOR'S SIGNATURE (If investigation required)	DATE SIGNED
RECOMMENDATION	SUPERVISOR'S SIGNATURE	DATE SIGNED

Distribution: Original to Headquarters Cashier

- ABC-220 to follow
- Conditions to follow; Hold in HQ until received
- Copy to District file
- Copy to Licensee