

(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
---------------------------	-------------------------------	-------------------------------------

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

ABC USE ONLY

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