

**APPLICATION FOR LICENSE BY LICENSED MANUFACTURER OR RECTIFIER
TO SELL VINOUS/MALT/SPIRITUOUS BEVERAGES**

4th CLASS

License Year: May 1 through
April 30 of the following year.

Make check payable to and
mail to:

Vermont Dept. of Liquor & Lottery
13 Green Mountain Drive
Montpelier, VT 05602

Application Fee: \$70.00

Print Full Name of Partnership, Corporation, Person, or LLC

Doing Business as – Trade Name

Address Location

Telephone Number

Mailing Address

Email Address

Application is hereby made for a 4th Class license by a licensed manufacturer or rectifier of malt or vinous beverages or spirits to sell by the unopened container and distribute, by the glass with or without charge, beverages manufactured by the licensee under and in accordance with Title 7 of the Vermont Statutes Annotated as amended and certify that all statements, information and answers to questions herein contained are true and in consideration of such license being granted do promise and agree to comply with all laws (state and local); to comply with all regulations made and promulgated by the Board of Liquor and Lottery to allow the Board of Liquor and Lottery and any of their assistants and investigators to examine at any time the premises, supply of beverages, records and papers in reference thereto; to keep such records as the Board of Liquor and Lottery may require; and upon hearing, the Board of Liquor and Lottery may at its discretion suspend or revoke such license whenever it may determine that the law or any regulations of the Board of Liquor and Lottery have been violated, or that any statement, information or answers herein contained are false.

Please attach certificate of training to application.

APPLICANTS: Describe fully the premises for which this application is made (i.e. type of construction, number of stories, location, etc.)

Does applicant? Lease Hold title to property. (please check one)

Name and address of Lessor:

I/We hereby certify under pains and penalties of perjury, that I/we are in good standing with respect to or in compliance with a plan approved by the Commissioner of Taxes to pay any and all taxes due to the State of Vermont on the date of this application (VSA, Title 32, sub section 3113).

The applicant understands and agrees that the Board of Liquor and Lottery may obtain criminal history record information from State and Federal record repositories prior to acting on this application.

I/We hereby certify that the information in this application is true and complete.

Dated at _____ in County of _____ State of Vermont
on this _____ day of _____ 20____

Signature of Individual, partners, member or authorized agent