

Bureau of Alcoholic Beverages and Lottery Operations Division of Liquor Licensing & Enforcement 8 State House Station, Augusta, ME 04333-0008 Tel: (207) 624-7220 Fax: (207) 387-3434 Email inquiries: <u>MaineLiquor@maine.gov</u>

LICENSED MAINE WHOLESALERS REQUEST FOR: BEER & WINE TASTE TESTINGS

License No:	Legal Name:			
D/B/A Name:				
Mailing Address:				
Town/City:	St	ate:	Zip Code:	
Telephone:		Fax:		
Email (please print): _				
Date of Event:	Time – From:		: To:	
Number of Persons A	ttending:		Outside (Outside need diagram)	
Title and Purpose of E	Event:			
Location of Event:				
Physical Address:				
Town/City:		State:	Zip Code:	
Contact Person:		Telephone Number:		
Email address of conta	act person:			
Signature of License	ee or Corporate Officer	-	Date	
		_ PLEASE	ЕАТТАСН	
Print Name of Licensee or Corporate Officer		List of vendors participating List of Employees serving alcohol		
FOR USE RESTRICTIONS:	ONLY BY DIVISION OF	LIQUOR LICENS	SING & ENFORCEMENT	
			DIVISION USE ONLV	

DIVISION USE ONLY				
License No:				
Class:				
□ Approved □ Not Approved				
By:				