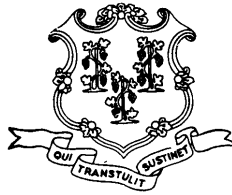


STATE OF CONNECTICUT
DEPARTMENT OF CONSUMER PROTECTION
LIQUOR CONTROL DIVISION

Telephone: (860) 713-6210
 Email: liquor.control@ct.gov
 Website: www.ct.gov/dcp



APPLICATION FOR ADDITIONAL CONSUMER BAR(S)

Instructions:

Complete this application and submit with a check or money order made payable to *"Treasurer, State of Connecticut"* for the total number of additional consumers bar(s) for which you are requesting approval at \$190.00 each.

→ Return the completed application and appropriate fee to:

License Services Division
Department of Consumer Protection
165 Capitol Avenue
Hartford, CT 06106

Permittee Name (First Name, Middle Initial, Last Name)		Liquor Permit Number	
Name of Business			
Business Street Address (Location of Business)			
City		State	Zip code
Business Telephone Number (with area code)		Business Fax Number (with area code)	
Backer's Name (LLC, INC, SOLE PROP.)		Number of additional consumer bar(s) requested @ \$190.00 each	

NOTE:

☞ This application must be accompanied by an 8.5 x 11 inch sketch of the entire premises, showing the location(s) of the additional consumer bar(s) for which you are requesting approval. You must also submit a photograph(s) of these proposed location(s).

I have attached a sketch and photograph(s), as described above, related to the additional consumer bar(s) for which I am requesting approval Yes No

Signature of duly authorized representative	Date
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