

OFFICE USE ONLY		
<input type="radio"/> Original	<input type="radio"/> Amended	Date _____

INSTRUCTIONS FOR FARM CIDERY BRANCH OFFICE PERMIT (CF 623)

**Mail the application to:
New York State Liquor Authority
80 S. Swan St, Suite 900
Albany, NY 12210-8002**

PLEASE READ THE INSTRUCTIONS CAREFULLY BEFORE COMPLETING THE APPLICATION

APPLICATIONS MAY NOT BE HANDWRITTEN - THE APPLICATION CAN BE COMPLETED ON OUR WEBSITE AND THEN DOWNLOADED AND PRINTED FOR SUBMISSION TO THE AUTHORITY.

The following material has been prepared to assist you, the applicant, in developing and filing a completed application which will result in the approval and issuance of this permit. **It is your responsibility to present a clear explanation of your intended method of operation and business outline. Incomplete applications may be disapproved. Please make sure you read the instructions carefully, answer every question and submit any documentation required to support your application.**

**YOU MUST HOLD A FARM CIDERY LICENSE IN ORDER TO QUALIFY FOR A FARM CIDERY BRANCH OFFICE PERMIT
YOU MAY HOLD PERMITS TO OPERATE UP TO FIVE BRANCH OFFICES IN NEW YORK STATE.**

APPLICATION

APPLICANT NAME

- Enter sole proprietor's full name
- If a partnership, enter full name of each partner.
- If a corporation, enter the corporate name.
- If a limited liability company or limited partnership, enter the company name.
- **IMPORTANT:** Enter telephone number of premises or a telephone number where we can contact **you, the applicant**, not your attorney or representative.

TRADE NAME

- Enter your DBA - "Doing Business As" name. This is the name that appears on your Business Certificate or Certificate of Assumed Name. Only authorized trade names may be used on your signs, menus, web pages, phone listings, advertisements, etc. If no trade name will be used, then select this option from the drop-down menu.

LICENSED FARM CIDERY STREET ADDRESS

- Enter the full address and county of the Farm Cidery that is currently licensed by you (911 street address where applicable).
- Farm Cidery mailing address, if different than above.
- Serial Number of the licensed Farm Cidery
- E-mail address, if available.

ATTORNEY/REPRESENTATIVE CONTACT NAME

- Enter the name, address and telephone number of the attorney, representative or contact person for the completion, filing and handling of this application (enter email address and cell phone number if available).

BE ADVISED THAT NOTICES OF INCOMPLETE APPLICATIONS WILL BE MAILED TO THE APPLICANT AS WELL AS THE ATTORNEY OR REPRESENTATIVE, IF APPLICABLE. YOU, THE APPLICANT, ARE ULTIMATELY RESPONSIBLE FOR THE INFORMATION PROVIDED IN THE APPLICATION.

- If the proposed premises are outside of the city of New York, are there any restrictions on the sale of alcoholic beverages?
- Check with your city, town or village clerk to determine if there any restrictions that may apply to the sale of alcoholic beverages and list same.

RIGHT TO PREMISES

- Check the appropriate box disclosing how you are in possession of the premises (own, lease, etc).
- If you own the premises you must supply the deed. If you have purchased the real property within the past year, you are required to provide documentation showing the source of the funds used for the purchase.
- **If you are leasing the premises you must submit a signed copy of the lease or a letter of intent.** The letter of intent must list the intended term and rent amount. The lease **MUST** run for the FULL term of the license or be renewable for at the least the full term.
- Answer all questions here regarding the lease arrangements. **NOTE: The lease must state the EXACT location of the premises in the building.**

OFFICE USE ONLY		
<input type="radio"/> Original	<input type="radio"/> Amended	Date _____

LANDLORD IDENTIFICATION

- List the name and address of the owner of the building/ property.
- List the name and address of the owner of the building/ property.

ESTABLISHMENT QUESTIONNAIRE

- Answer ALL questions completely. Please do not answer "see attached" to any question. Any incomplete answer may delay or prevent the processing of the application.
- In this section you must describe the premises to be licensed.
- You must indicate what floor(s) the licensed premises will be located on and answer all questions pertaining to the interior of the premises to be licensed including what each room in the premises to be licensed will be used for and access between floors.
- If there is interior access from the floor(s) you are licensing to any other floor(s) of the building (whether or not you are licensing those floors), you **MUST** describe the means of access (i.e.. stairs, elevator) and state what occupies the other floor(s) (i.e.. apartments, offices).
- If you are using the basement or any other area of the building to store alcoholic beverages, that area must be included as part of the licensed premises. If there is no interior access to the storage area from the premise you propose to license, you must file for a Warehouse Permit (this application is available on-line at our website). Please make sure to answer this question accurately on the Establishment Questionnaire to avoid any confusion or delays in processing your application.

HELPFUL HINT: You may find it easier to prepare your diagram of the premises prior to completing this section....seeing the layout of the premises may help you in answering the questions.

- If there will be production at this location a copy of the Federal Basic Permit from the Alcohol and Tobacco Tax & Trade Bureau (TTB) must be submitted.

APPLICANT'S STATEMENT

- Please read this section carefully. This section is an affirmation that you understand that you are bound by the answers and information you provide in the application.
- Applicant signatures required for: sole proprietors, each partner in a partnership and at least one authorized official of a corporation.

PHOTOGRAPHS

- Must be at least 5" x 7" and NO POLAROIDs.
- Interior Photographs - All rooms must be clearly shown together with a full view of the room or rooms.
- Exterior Photographs - Showing front of premises, structure or proposed site.
- PHOTOS ARE REQUIRED AT THE TIME OF FILING THE APPLICATION. Additional photos may be required if renovations or construction are not completed at the time of the submission.
- All hard copy photographs submitted **MUST BE ENDORSED** on the reverse side with the name and address of the applicant and the date when the photographs were taken.
- You may submit your photos electronically. Please refer to the detailed instructions on our website.

DIAGRAMS

- All diagrams must be submitted on 8 ½" x 11" paper AND **MUST BE CLEARLY MARKED.**
- See examples at end of instructions.

1. Interior Diagram:

- Diagram or sketch of the interior with dimensions. Include ALL floors that will be part of the licensed premises (including the basement or any other floor being used for the storage of alcoholic beverages). Label all rooms, including bathrooms, and the basement or any other floor if part of the licensed premises (i.e.. storage room, office).
- Each floor should have its own diagram (including any floor used for the storage of alcoholic beverages).
- Show all entrances and exits, sanitary facilities, display windows or other openings, counters, closets, shelves and storage areas.
- **IMPORTANT: All submissions, including photographs and diagrams, must have the name and address of the applicant's premises.**

NOTICE OF APPEARANCE

- Section 166 of the Executive Law requires a regulatory agency to maintain for public inspection a record of who appears before it for a fee as a third party (i.e. an attorney, an agent, a lobbyist or representative) on behalf of a person or organization subject to the regulatory jurisdiction of the agency.
- This form must be completed and submitted by **all** represented applicants.
- If you were assisted in the preparation and/or filing of the application, you must have the person you paid complete and submit the Notice of Appearance with the application.

APPLICATION FOR FARM CIDERY BRANCH OFFICE (CF 623)

TO BE FILLED IN BY APPLICANT

Name of Applicant :
(Sole Proprietor, Partnership, Corporation, LLC, LLP, LP, etc.)

Trade Name(DBA): *See instructions. You must provide a trade name or indicate that no trade name will be used.*

Licensed Farm Cidery Street Address:

City: , NY Zip Code: County:

E-mail address:

License Number: Telephone Number:

Mailing Address of Licensed Farm Cidery (if different):

City: , NY Zip Code: County:

BRANCH OFFICE INFORMATION

Branch Office Street Address:

City: , NY Zip Code: County:

Mailing Address of Premises (if different):

City: , NY Zip Code: County:

Telephone Number:

CONTACT INFORMATION

Name of Contact Attorney Representative Contact

Submit a completed Notice of Appearance

Office Address

City: State Zip Code

Telephone Number of Office (Include Area Code)

E-mail Address (if available)

[OFFICE USE ONLY] APPROVED DISAPPROVED

RIGHT TO PREMISES

1. RIGHT TO PREMISES

1a. By what right does the applicant have possession of the premises?

- Own
 Lease
 Sub-Lease
 Binding contract to acquire real property
 Written intent to Lease

Other (explain):

If leasing, the lease must run for the full term of the license period or at least be renewable to cover the full term. Month to month leases or month to month renewal terms are not acceptable.

1b. Do the terms of the lease or other arrangement require the applicant to provide any consideration based on a percentage of the receipts of the business?

- Yes No

If YES, list the section/page of the lease this information can be found

2. OTHER INTERESTED PARTIES

Does or will anyone other than the applicant/principals share on a percentage basis or in any way in the receipts, losses or deficiencies of the business to any extent whatsoever?

- Yes No

If YES, state the names and address of such persons, the nature and percent of their share and date acquired.

Name	Address	Nature of interest	Date Acquired
<div style="border: 1px solid black; height: 20px;"></div>	<div style="border: 1px solid black; height: 20px;"></div>	<div style="border: 1px solid black; height: 20px;"></div>	<div style="border: 1px solid black; height: 20px;"></div>
<div style="border: 1px solid black; height: 20px;"></div>	<div style="border: 1px solid black; height: 20px;"></div>	<div style="border: 1px solid black; height: 20px;"></div>	<div style="border: 1px solid black; height: 20px;"></div>
<div style="border: 1px solid black; height: 20px;"></div>	<div style="border: 1px solid black; height: 20px;"></div>	<div style="border: 1px solid black; height: 20px;"></div>	<div style="border: 1px solid black; height: 20px;"></div>
<div style="border: 1px solid black; height: 20px;"></div>	<div style="border: 1px solid black; height: 20px;"></div>	<div style="border: 1px solid black; height: 20px;"></div>	<div style="border: 1px solid black; height: 20px;"></div>

LANDLORD IDENTIFICATION INFORMATION

In order to obtain the most accurate information this form should be completed by the Landlord. This form must be completed and submitted regardless of whether the property owner is a third party landlord or the applicant.

1. Name of Landlord
(as it appears on lease and deed):

2. Landlord Mailing Address

Street Address:

City: State: Zip Code:

3. Telephone Number of Landlord:

4. Landlord Principals (ALL landlord principals must be disclosed below.)

Name	Address (if different than Landlord's Mailing Address above)
<input style="width: 280px; height: 25px;" type="text"/>	<input style="width: 520px; height: 25px;" type="text"/>

Name	Address (if different than Landlord's Mailing Address above)
<input style="width: 280px; height: 25px;" type="text"/>	<input style="width: 520px; height: 25px;" type="text"/>

Name	Address (if different than Landlord's Mailing Address above)
<input style="width: 280px; height: 25px;" type="text"/>	<input style="width: 520px; height: 25px;" type="text"/>

Name	Address (if different than Landlord's Mailing Address above)
<input style="width: 280px; height: 25px;" type="text"/>	<input style="width: 520px; height: 25px;" type="text"/>

5. Are any persons listed on this form currently or previously licensed under the ABC Law? Yes No

Serial Number	Licensee Name
<input style="width: 280px; height: 25px;" type="text"/>	<input style="width: 520px; height: 25px;" type="text"/>

Serial Number	Licensee Name
<input style="width: 280px; height: 25px;" type="text"/>	<input style="width: 520px; height: 25px;" type="text"/>

Serial Number	Licensee Name
<input style="width: 280px; height: 25px;" type="text"/>	<input style="width: 520px; height: 25px;" type="text"/>

6. Are any persons listed on this form police officers: Yes No
If yes, list names below:

Name

Name

7. List number of years real property has been owned or legally controlled by the landlord:

ESTABLISHMENT QUESTIONNAIRE

In this section you must describe the premises to be licensed. Answer ALL questions completely. Please do not answer "see attached" to any question. Any incomplete answer may delay or prevent the processing of the application.

Helpful Hint: Drawing your diagram and reviewing your photographs may assist you in completing this section. See sample diagrams at the end of this application.

1. Zoning

1a. State what the area is zoned for:

(i.e.. Residential, Business,

2a. Describe the type of building in which the premises will be located.

2b. Has the building/premises been known by any other address? Yes No

If YES. please specify:

2c. Is there currently an active license or has there ever been a license to traffic in alcoholic beverages at this location? Currently Licensed Previously Licensed Never Licensed Do Not Know

Name of Licensee:

License Serial Number:

2d. Are there any disciplinary actions pending against the applicant, current licensee, or prior licensee?

Yes No Do Not Know

Any pending disciplinary action may delay a determination on this application or result in the disapproval.

2e. If the proposed premises has never been licensed, what was the prior use?

2f. Is any other floor or area of the building currently licensed? Yes No

If YES, Name of Licensee:

License Serial Number:

3. Premises (Interior):

3a. List the number of floors in the building as a whole' including the basement:

3b. List the number of floors of the premises to be licensed, including the basement, if applicable:

3c. List the floor numbers where the proposed premises will be located, if it is located within a multi-story building. Example: 2nd & 3rd Floor

3d. Where is the alcohol stored?

3e. Is there interior access to any other floor(s) or area(s) that will not be part of the premises to be licensed? Yes No
 Show the means of access on the interior diagram(s). **Note:** A Branch Office must **not** be located within, share a common entrance and exit with, or have any interior access to any other business, including premises licensed to sell alcoholic beverages at retail.

3f. Are the premises to be licensed divided in any way, by a public or private passageway, etc., over which the applicant does not have exclusive possession and control? Yes No
 Example: hallway, stairwells, common areas, etc.

If YES, describe:

3g. Will cider be manufactured at this location? Yes No

If YES, submit a copy of the Federal Basic Permit as required by the Alcohol and Tobacco Tax & Trade Bureau (TTB) or submit correspondence from TTB stating a permit is not required.

OFFICE USE ONLY		
<input type="radio"/> Original	<input type="radio"/> Amended	Date _____

APPLICANT'S STATEMENT

I, [print name] _____

(the sole proprietor , partner , corporate principal or LLC/LLP member)
 understand that the State Liquor Authority will rely on each and every answer in the application and accompanying documents in reaching its determination and state, under penalty of perjury, that all statements and representations therein are true to the best of my knowledge and belief; and

I state that the location and description of the premises to be licensed does not violate any requirement of the ABC law or other state or local ordinances; and

I understand that if any change occurs in the information provided to the Authority in the application, the licensee must notify the Authority by certified mail within 48 hours and if any change occurs after receipt of the license, the licensee must notify the Authority by certified mail within 10 days. I understand that failure to give such notice may result in disapproval of the application or revocation or non-renewal of any license for which this application is submitted; and

I understand that the licensee will be bound by the statements and representations made in the application, including, but not limited to the licensee's method of operation and the identity of persons with an ownership or financial interest in the licensed premises; and that all statements and representations made become conditions of the license; and

I understand that any physical alterations to, or changes to the size of the area used for the sale and consumption of alcoholic beverages, must be reported to the Authority and may require the approval of the Authority; and

I understand that the licensee must keep the Authority advised of any change in the mailing addresses of the licensee, the licensee's principals, and the licensee's landlord.

I understand that the licensee's failure to operate the licensed premises in accordance with the statements and representations made in the application may result in revocation of any license for which the application was submitted; and

I understand that any false statement or misrepresentation will constitute cause for disapproval of the application or revocation or non-renewal of any license for which this application is submitted.

Signature

Date



STATE OF NEW YORK
NOTICE OF APPEARANCE

Section 166 of the Executive Law requires a regulatory agency to maintain for public inspection, a record of who appears before it, for a fee as a third party (i.e., an attorney, an agent, lobbyist*, or representative) on behalf of a person or organization subject to the regulatory jurisdiction of the agency. This usually occurs when the third party's client is involved in an enforcement, formal permit, or application matter. *This form is subject to all the rules and regulations of the Freedom of Information Law. Information that is confidential as a matter of law need not be furnished.*

Agency:

Date

Division/Bureau:

1. Name of individual appearing:

Address:

Telephone:

Email:

2. Client represented:

Address:

Telephone:

3. Subject of appearance: **Regulatory/Enforcement** **Lobbying**

4. Acting in capacity of:

Attorney **Lobbyist** **Agent**

Other (describe) _____

5. Are you being compensated? **Yes** **No**

If YES, Check FEE or SALARY **FEE** **SALARY**

6. Signature of individual appearing: _____

7. Agency official (print name): _____

Signature: _____

*A LOBBYIST is a person or organization, other than a New York State government employee acting in an official capacity, who appears for the purpose of influencing the adoption or rejection of proposed rules, regulations, rates, legislation, including the State budget or the specification or award of a State Procurement Contract. An appearance for lobbying purposes can be a personal visit, letter, telephone call, conversation at a meeting, or any other type of contact, but does not include "on the record" proceedings or hearings.

OFFICE USE ONLY		
<input type="radio"/> Original	<input type="radio"/> Amended	Date _____

DIAGRAM INSTRUCTIONS

All diagrams must be submitted on 8 ½" x 11" sheets of paper.

Do not use graph paper as this cannot be clearly scanned.

- Each and every floor should have its own diagram (including any floor used for the storage of alcoholic beverages or office space where books and records are maintained). Label each floor (basement, ground floor, second floor, etc.)
- Provide the interior and exterior dimensions of the premises, including the length of all bars and other prominent fixtures.
- Label **all** rooms, including but not limited to: storage rooms, offices, dining areas, kitchen/food preparation areas, bathrooms, etc.
- If on premise consumption will be permitted, show the number of tables and chairs for patrons within the establishment and indicate the number of chairs/stools at the bars.
- Show any outside dining/service areas on the diagram for the appropriate floor (e.g. sidewalk café, deck, porch, roof, etc.). Give details as to how this area will be contained and supervised. **Note:** The outside area must be connected to the premises to be licensed, and cannot be divided by any passageway over which the applicant does not have exclusive control. The outside area must be enclosed by a physical barrier that restricts patrons from entering and exiting the area.
- Show all interior and exterior walls, entrances and exits, stairways, elevators, trap doors, sanitary facilities, display windows or other openings, counters, closets, shelves, storage areas, and any other notable features. **Leave space between the exterior walls and the paper's edge.**
- If the premises occupies a portion of a floor, depict the entire floor of the building and show the proposed licensed premise's location on the floor. Show all points of access to and from the premises and label any shared/common areas. A Branch Office shall not be located within, share a common entrance and exit with, or have any interior access to any other business, including premises licensed to sell alcoholic beverages at retail.
- The holder of a farm cidery branch office permit may conduct tastings and sell at retail for consumption on or off the licensed premises, any cider manufactured by the licensee or any New York state labeled cider. Provided, however, that for tastings and sales for on-premises consumption, the licensee must keep food regularly available for sale or service to its retail customers for consumption on the premises.

Example of Premise Diagram

