



**State of Rhode Island
Department of Business Regulation
Division of Commercial Licensing
Liquor Enforcement and Compliance Section
1511 Pontiac Ave, Bldg. 69-1
Cranston, RI 02920**

REQUIREMENTS FOR INITIAL WHOLESALER/MANUFACTURER LICENSE

- A license is required for the sale, storage, manufacturer, or importation of alcoholic beverages.
- Annual license fees are:

Wholesale Class A:	\$2,000 (Beer & Wine Only)
Wholesale Class B:	\$4,000 (Beer, Wine & Spirits)
Wholesale Class C:	\$200 (Industrial/Medical Usage)
Brewery:	\$500
Distillery:	\$500 when producing less than 50,000 gals \$3,000 when producing more than 50,000 gals
Winery:	\$500 when producing less than 50,000 gals \$1,500 when producing more than 50,000 gals
Farmer Winery:	\$500 when producing less than 50,000 gals \$1,500 when producing more than 50,000 gals
Brewpub Manufacturer:	\$500 when producing less than 50,000 gals \$1,000 when producing more than 50,000 gals
Brew on Premises:	\$100 when producing less than 50,000 gal \$1,000 when producing more than 50,000 gal

***All above fees are not due upon submitting the application. The fees listed will be prorated upon the issuance of the license.**

Rectifier:	\$500 -Flat Fee. Due when application is submitted.
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- The following forms must be filed with this office:
 - a. Initial application for license by Partnership/LLC/Individual or Corporation.
 - b. Copy of zoning inspection/approval from the city/town.
 - c. Copy of fire inspection/approval from the local fire marshal.
 - d. Submission of taxpayer status affidavit (attached to application as Exhibit 1).
 - e. Submission of Criminal History Record (instructions attached to application as Exhibit 2).
 - f. The applicant must submit a copy for the Federal Basic Permit to the Department. This permit can be obtained from the Federal Tax & Trade Bureau at the National Revenue Center, Cincinnati, OH by calling 1-800-398-2282 or 1-513-684-3334 and ask for a Specialist and tell them what state you want to be licensed in.
- A hearing date will be set & the applicant will be notified of it.
- This office shall give notice of the application and date of hearing by advertisement published once a week for at least two weeks in some newspaper having a general circulation in such city or town (Applicant will be required to pay for the advertisement in advance).



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- Abutter Notice(s)- Evidence of notification of application and hearing date to all **owners** of property within 200 feet of proposed place of business by mail or email. The Department **strongly** recommends the applicant contact the local municipality for the complete and correct listing of all property owners. Most have a tax assessor database and/or a GIS Mapping system online. This process ensures the notices go out to the actual property owners, rather than renters, tenants, or business names.
- It shall be necessary for the applicant to make and provide a secure premise for the storage of alcoholic beverages to the satisfaction of the Department. Said premises shall have a proper repository for invoices and other documents which shall be available for inspection by the Department during normal operating hours. Electronic Records are acceptable.
- Provide suitable truck transportation for delivery of alcoholic beverages if the applicant intends on transporting beverages in the course of business. Any truck used for such deliveries shall have a cab separated from the body by a permanent partition.
- Identify hours of operation at the time of the hearing.
- It shall be necessary that the applicant provide the Department with information regarding product line. Specific information as to commitment from suppliers or manufacturers regarding the product to be sold shall be provided to the Department. Wholesalers may purchase from primary source or its agent only.
- Licenses shall be issued only to a citizen resident of this State, or to a business formed in this State.
- It shall be unlawful for any holder of a manufacturer's or wholesaler's licensee to have any direct or indirect interest in any retailer's license or in the business carried on under a retailer's license. Does not apply to brewpubs.
- Every question on the application form must be answered. Any false statement made by the applicant will be sufficient grounds for the denial of the application or the revocation of the license in case one has been issued.
- Corporate applicants: attention is called to the requirements of 3-5-10 of the General Laws:
 - a. All newly elected Officers or Directors must be reported to the Board of License Commissioners with thirty (30) days.
 - b. Any acquisition by any person of more than ten percent (10%) of any class of corporate stock must be reported within thirty (30) days.
 - c. Any transfer of fifty percent (50%) or more of any class of corporate stock can be made only by written application to the Licensing Board subject to the procedures for a transfer of a license.
- All forms are to be correctly and completely filled out before returning them to the Department. Failure to do so will result in a delay in processing your application.



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INITIAL APPLICATION FOR WHOLESALER/MANUFACTURER LICENSE

All licenses expire on December 1st of every year. A 10% late fee will be applied after this date.

Wholesaler: Class A Class B Class C

Manufacturer: Brewery Winery Distillery Farmer Winery Brewpub Brew on Premises Rectifier

Gallons Produced: Less than 50,000 Gallons More than 50,000 Gallons

Business Structure: Corporation Partnership LLC Individual

Name of Applicant/Corporation: _____

If applicable d/b/a: _____

Address of Premise: _____

City: _____ State: _____ Zip Code: _____

Federal ID# _____ Phone # _____

If applicable State of Incorporation/Organization: _____

Date of Incorporation/Organization: _____

Email Address: _____

Name, Address, & Telephone number of all Officers. If applicable, please state percentage of ownership interest.

President: _____

Vice President: _____

Secretary: _____

Treasurer: _____

****The above listed officers must submit a Criminal History Record in accordance with Exhibit 2 & Tax Affidavit Exhibit 1.**

Name, Address, & Telephone number of all Members of the Board of Directors and holders of ownership

interests. If applicable, please state percentage of ownership.



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(Corporations having 25 or more stockholders need not file a list of names & addresses of stockholder).

Have any Directors, Board Members, or Stockholders ever been convicted of a crime?

Yes No

If you've answered "Yes", please provide written explanation and submit Criminal History Record.

Does the applicant own premises? Yes No

Is the property mortgaged? Yes No

Is the property leased? Yes No

Name & Address of Mortgagee or Lessor:

Is any other business to be carried on in the license premises? Yes No If yes, please state business

name, type of business, & amount of capital invested in this business:

Hours of Operation: List Days and Times.



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Is the Applicant or any of its Officers, Directors, Board Members, or Stockholders interested directly or indirectly, as principle or associate, or in any manner whatsoever, in any license issued under Title 3 of the General Laws of the State of Rhode Island?

Yes No

If you've answered "Yes", please provide explanation

* I hereby certify under the penalty of perjury that the above statements are true.

Applicant Signature: _____ Date: _____



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Exhibit 1



Tax Payer Status Affidavit / Identity Verification

All persons applying or renewing any license, registration, permit or other authority (hereinafter called “licensee”) to conduct a business or occupation in the state of Rhode Island are required to file all applicable tax returns and pay all taxes owed to the state prior to receiving a license as mandated by state law (RIGL 5-76) except as noted below.

In order to verify that the state is not owed taxes, licensees are required to provide their Social Security Number or Federal Tax Identification Number as appropriate. These numbers will be transmitted to the Division of Taxation to verify tax status prior to the issuance of a license. This declaration must be made prior to the issuance of a license.

Licensee Declaration

- I hereby declare, under penalty of perjury, that I have filed all required state tax returns and have paid all taxes owed.
- I have entered a written installment agreement to pay delinquent taxes that is satisfactory to the Tax Administrator.
- I am currently pursuing administrative review of taxes owed to the state.
- I am in federal bankruptcy. (Case # _____)
- I am in state receivership. (Case # _____)
- I have been discharged from Bankruptcy. (Case # _____)

 Full Name (Please Print or Type)

 Social Security Number (or FEIN for Business)

 Signature

 Date



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Exhibit 2



**CRIMINAL HISTORY RECORD SUBMISSION
REQUIREMENTS**

Criminal History Record (“CHR”) must be submitted to the **Liquor Section** of the **Department of Business Regulation (“DBR”)**, Division of Commercial Licensing, with each Liquor Application. Processing applications is contingent upon the complete disposition, or results of any charges delineated or resolved prior to application submission. See instructions below to learn how to obtain your CHR.

INSTRUCTIONS

Applying in Person: A Criminal History Record may be obtained by visiting the Bureau of Criminal Identification at the Rhode Island Department of Attorney General (“DAG”). To apply for a CHR in this manner, bring a picture-identification, showing your date of birth.

Applying by Mail: To apply by mail, send a notarized copy of a photo ID, showing your date of birth, and a signed/notarized letter, giving permission to the DAG to conduct a background investigation, along with a self-addressed stamped envelope.

Mail to: **Department of the Attorney General**
4 Howard Avenue
Cranston, Rhode Island, 02920

Hours of operation are 8:30 a.m. to 4:30 p.m.

The cost for a CHR, whether applying in person or by mail, is five dollars (\$5.00), and is payable by check or money order to the “BCI”. Please allow time for the DAG to process and generate your request. For further questions about this process, you may contact the DAG at (401) 274-4400.

***If you reside in another state, supply a CHR from your home state, as well as one from Rhode Island.**