



Minnesota Department of Public Safety
ALCOHOL AND GAMBLING ENFORCEMENT DIVISION
445 Minnesota Street, Suite 1600, St. Paul, MN 55101
(651) 201-7504 TDD (651) 282-6555
FAX (651) 297-5259

**APPLICATION FOR FARM WINERY BRANCH LICENSE
NO FEE**

License Expiration Date: License Number: Date Approved:

I, _____ as _____
(Owner, Partner or Officer)

for and in behalf of _____
(Trade Name)

(Home Office Address) (City) (Zip Code)

Phone Number _____, Fax Number _____ hereby apply for a farm winery branch license to store

finished wine and distilled spirits in a noncontiguous warehouse, as herein designated, at:

The branch establishment shall be under the management of _____

Name of Firm

Signature of Affiant