



CITY OF PORTLAND
Permitting and Inspections Department

What is Needed to Apply:

- 8 ½” x 11” diagram showing layout of the premises
- City application for Brewery, Winery and Distillery Manufacturing License
- Payment of fees (see fee schedule):
 - Fee Schedule:
 - Application Fee: \$45.00
 - License Fee: Small Brewery, Distillery or Winery \$250.00
 - License Fee: Large Brewery, Distillery or Winery \$2,000.00

The application must be complete in order to be accepted and processed.

Before you submit your application to the Business Licensing Office:

- Call the Department of Liquor Licensing in Augusta at 207-624-7220.
- Contact the Portland Zoning/Code Enforcement office at 207-874-8703 to determine if your business address is zoned appropriately.

After you submit your application to the Business Licensing Office:

- Proceed with arranging for inspections as your establishment is ready.
- When the Business Licensing Office has received all approvals from the required departments, we will issue your license.. You may contact us for a license status update, **but please note that we must receive approvals directly from all departments on the accompanying “Steps to Approval” sheet before issuing your license.**



CITY OF PORTLAND
Permitting and Inspections Department

Brewery, Winery and Distillery Manufacturing License – Steps to Approval

In order for the Business License to issue your license, we must receive approvals directly from the following departments:

- Zoning/Code Enforcement
- Fire Inspections
- Treasury
- Police Department
- Public Services/Engineering - grease trap (if applicable)

Your responsibilities after you apply include:

- Contact the Zoning/Code Enforcement department (room 315) at 874-8703 to determine if the address of your business is zoned for the purpose for which you intend to use it. This is also the department you should contact if you require a sign permit, an outdoor dining application, and a building permit.
- Contact the Historic Preservation Division at 874-8726 for specific requirements if your business is located in a Historic District. Visit <http://click.portlandmaine.gov/portlandhistoric/> to determine your district.
- Contact the City of Portland Fire Inspections department at 874-8400 to arrange for an inspection after renovations.
- Contact the Treasury department at 874-8490 to determine if you, the owner of your business premises, or the previous business tenant, owe any outstanding taxes to the City of Portland. We cannot issue a license if there are delinquencies on the part of the business owner or landlord.
- Contact Public Services Engineering department at 874-8801 for information about grease trap requirements if food preparation is happening on premise.
- Contact the Department of Agriculture 287-3841 to obtain the correct State of Maine food license for your business.

Once we have received approvals from the departments listed above, we will issue your license and contact you.

If you have any questions about this process, please contact Business Licensing at 874-8783 or bl@portlandmaine.gov.



CITY OF PORTLAND
Permitting and Inspections Department
Application for Brewery, Winery and Distillery Manufacturing License

<input type="checkbox"/> Application Fee \$45.00			
<input type="checkbox"/> Small Brewery \$250.00		<input type="checkbox"/> Large Brewery (930,001 gallons or more) \$2,000.00	
<input type="checkbox"/> Small Distillery \$250.00		<input type="checkbox"/> Large Distillery (More than 50,000 gallons) \$2,000.00	
<input type="checkbox"/> Small Winery \$250.00		<input type="checkbox"/> Large Winery (More than 50,000 gallons) \$2,000.00	
Business Information			
Business Name (d/b/a):		Phone:	
Location Address:		Zip:	
If new, what was formerly at this location:			
Mailing Address:		Zip:	
Contact Person:		Phone:	
Contact Person Email:			
Manager of Establishment:		Date of Birth:	Phone:
Owner of Premises (Landlord):			
Address of Premises Owner:		Zip:	

Sole Proprietor/Partnership Information (If Corporation, leave blank)

Name of Owner(s)	Date of Birth	Residence Address

Corporate/LLC/Non-Profit Organization Applicants (If Sole Proprietor or Partnership, leave blank)

Corporate Name		Corporate Mailing Address	
		Zip:	
Contact Person:		Phone:	
Principal Officers	Title	Date of Birth	Residence Address



CITY OF PORTLAND
Permitting and Inspections Department

QUESTIONS	Y/N
Will product be served on the premise by this establishment?	Y/N
If yes, please submit a City of Portland Brewery, Distillery, Winery Alcohol Service license	
What is your targeted opening date?	
Does the Issuance of this license directly or indirectly benefit any City employee(s)?	Y/N
If Yes, list name(s) of employee(s) and department(s):	
Have any of the applicants, including the corporation (if applicable), ever held a business license with the City of Portland?	Y/N
If Yes, please list business name(s) and location(s):	
Is any principal officer under the age of 21?	Y/N
Have applicant, partners, associates, or corporate officers ever been arrested, indicted, or convicted for any violation of law?	Y/N
If Yes, please explain:	

Applicant, by signature below, agrees to abide by all laws, orders, ordinances, rules and regulations governing the above licensee and further agrees that any misstatement of material fact may result in refusal of license or revocation if one has been granted. Applicant agrees that all taxes and accounts pertaining to the premises will be paid prior to issuance of the license.

It is understood that this and any application(s) shall become public record and the applicant(s) hereby waive(s) any rights to privacy with respect thereto. I/We, hereby authorize the release of any criminal history record information to the licensing authority. I/We, hereby waive any rights to privacy with respect thereto.

Signature _____ Title _____ Date _____

For more information about this license, see Portland City Code Chapter 3 at www.portlandmaine.gov and M.R.S.A. Title 28-A at www.maine.gov.

For Administrative Use Only

Amount: _____	Request Date / Approval	Notes: _____
Date Paid: _____	FD: _____ / _____	_____
CC _____ CA _____ CK _____	Ag: _____ / _____	_____
	PD: _____ / _____	_____
Amount: _____	PS: _____ / _____	_____
Date Paid: _____	Treasury: _____ / _____	_____
CC _____ CA _____ CK _____	Zoning: _____ / _____	_____