



For Official Use Only

STATE OF CONNECTICUT
DEPARTMENT OF CONSUMER PROTECTION
LICENSE SERVICES DIVISION
165 Capitol Avenue
Hartford CT 06106
Telephone: (860) 713-6160
Email: dcp.foodandstandards@ct.gov
Web Site: www.ct.gov/dcp

Reinstatement Application for Non-Alcoholic Beverage & Water Bottler

- **This form can only be used to reinstate a license that expired on or after 06/30/2012.** The license number you wish to reinstate must be entered on this form.
- **A change in ownership or location: Do not use this form.** This license is non-transferable. To obtain a new application, go to our web-site at www.ct.gov/dcp Questions can be directed to the Food & Standards Division at the above telephone number or email address.
- A total **reinstatement fee of \$165.00 for each one-year period of expiration** must accompany this form. Checks or money orders should be made payable to *"Treasurer, State of Connecticut."*
- Return this completed form with the applicable fee to the above address.
- All licenses expire annually on June 30th. A completed form with the applicable fee will reinstate the indicated license to the current renewal year.

License Number to be Reinstated		Expiration Date of License	
License Information			
Business Name			
Physical Location of Production/Storage Facility - Street Address		City	State Zip Code
Telephone Number	Email Address		FEIN
Mailing Address (if different than above)			
Business Name (if applicable)			
Street Address		City	State Zip Code
I certify, under penalty of law (Section 53a-157b, a Class A Misdemeanor) that the information provided in this application is the truth to the best of my knowledge.			
_____ Signature of Applicant		_____ Title	_____ Date