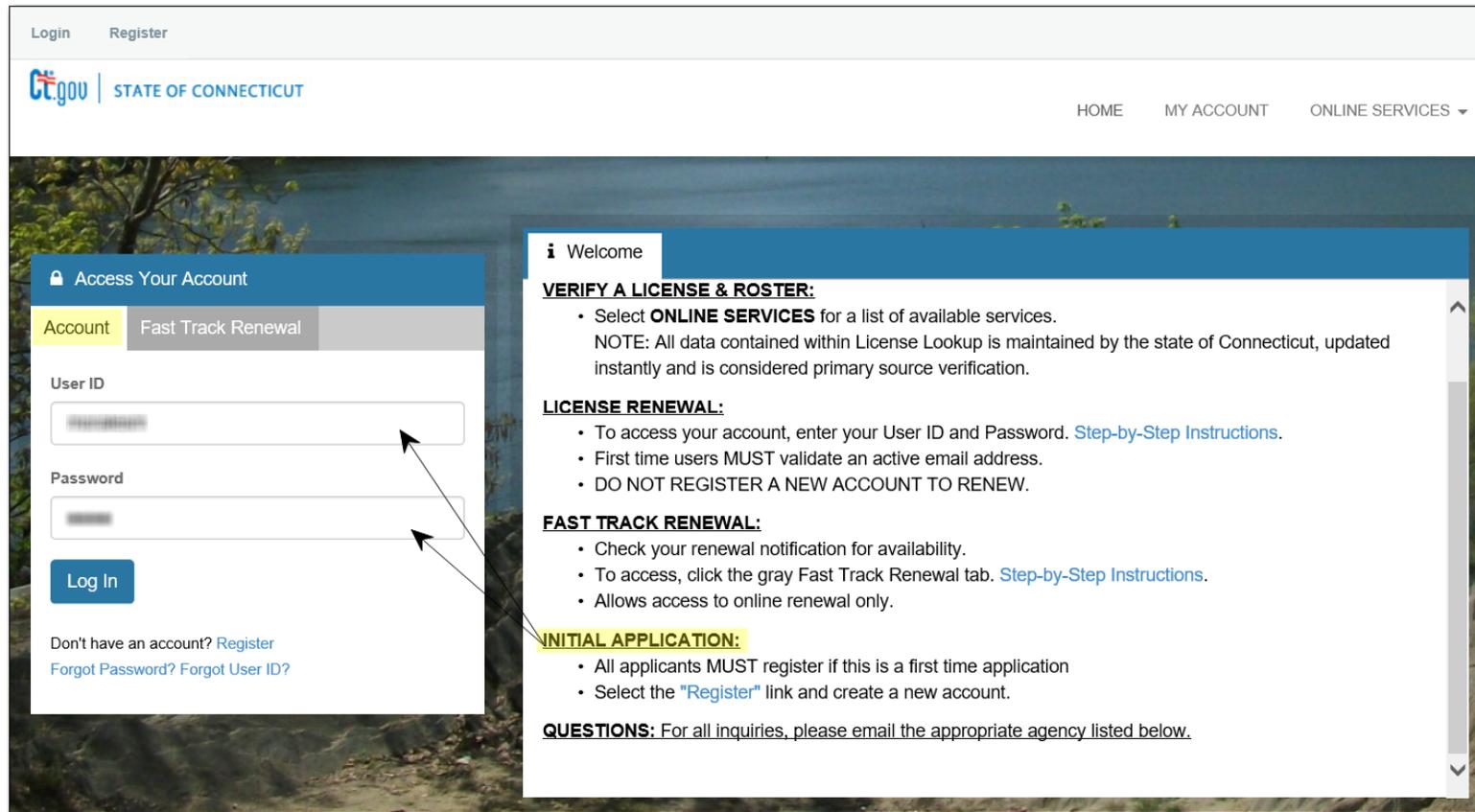
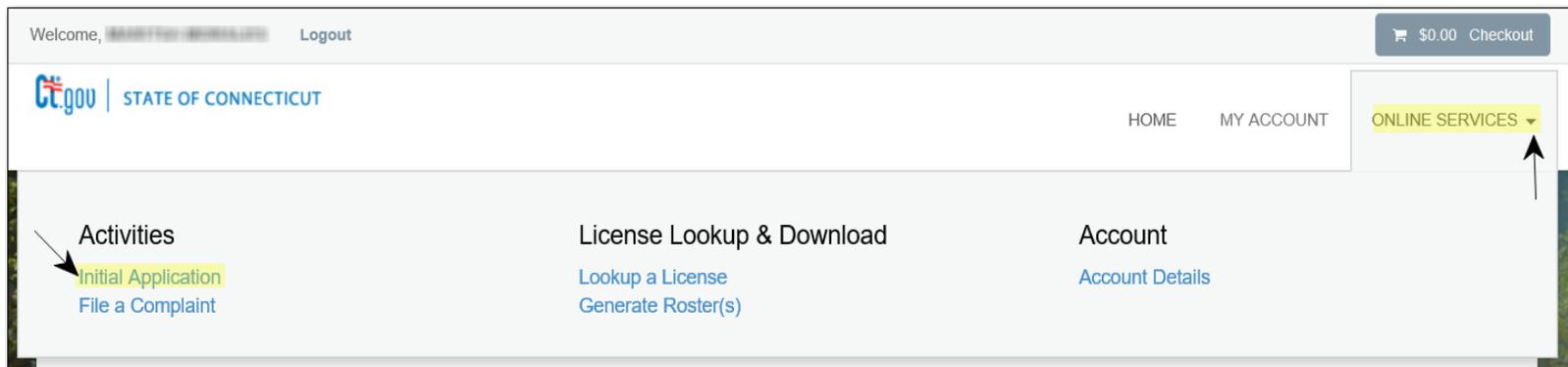


## Online Liquor Brand Application Step-by-Step Instructions

1. Log into your account at [www.license.ct.gov](http://www.license.ct.gov) with the User Id and Password for your CT out of state shipper, winery or manufacturer permit. If you need your User Id and or Password, please email the department at [dcp.online@ct.gov](mailto:dcp.online@ct.gov).



2. Once you have logged in, click **Online Services** and then **Initial Application** under **Activities**.



3. Select **Liquor Control** from the list and click on the word **Start** next to Liquor Brand Label option

**Below are all current License/Certification types available for online application.**

**Please expand a category to view the available types,  
then select "Start" for the License/Certification you wish to apply from the list:**

Public Health Practitioners	▼
Drug Control	▼
Medical Marijuana	▼
Environmental Health Practitioners	▼
Home Contractors	▼
Liquor Control	▲

	License	Board
Start	CT OUT OF STATE SHIPPER BEER	Liquor Control Division
Start	CT OUT OF STATE SHIPPER LIQUOR	Liquor Control Division
Start	LIQUOR BRAND LABEL	Liquor Control Division

4. Please read all instructions carefully and be sure you have all the required documentation available to upload to the online application. Click **Next** at the bottom of the page to continue.

### LIQUOR BRAND LABEL

Brand Application Start

Welcome to the State of Connecticut's Online Brand Label Registration System.

This application is only to be used to register a liquor brand label not already registered in Connecticut. Prior to applying, please check our website at [www.elicense.ct.gov](http://www.elicense.ct.gov) to verify the brand is not already registered. Application fees are non-refundable and non-transferable.

DO NOT use this application to apply for the following:

- Decanter registrations; all of the requirements apply, except for the fee. If the contents have been previously approved, the fee is exempt;
- Amendments to the contents of the container as originally approved or a change in the descriptive phraseology on the label of a product already registered.

To register a decanter or file amendments, click [here](#) to access the paper brand label registration application or the brand label amendment form.

Please be advised of the following prior to applying:

- In regard to wines, different vintages do not have to be registered, only different brands (varietels).
- When alcoholic beverages are imported into the United States, the labels must bear the registrant's name as the importer.
- The Connecticut General Statutes requires that containers of beer or other malt beverages sold in Connecticut be labeled with deposit and refund information as an environmental control.
- The fee for a registrant located in Connecticut or located Out-of-State is \$200.00 per label. The fee for products manufactured in the State of Connecticut by a Connecticut Manufacturer is \$15.00 per label. Fees are non-refundable and non-transferable.

The following documentation must be uploaded to this online application for the brand requesting registration:

- The federal label approval (COLA) .
- A copy of the brand label.
- The independent laboratory analysis or notarized statement detailing the alcohol type and proof.
- If applicable, letters of appointment for each of the wholesaler/distributor assigned to this brand. The letter must be on letterhead, be signed and dated and list the entire name of the product and geographic area(s) assigned.
- If you are not the manufacturer of the product, a letter from the manufacturer authorizing you to handle this product.
- If using a DBA/Trade Name, provide a copy of the basic permit issued by the Bureau of Alcohol Tobacco and Firearms or a letter confirming the use of such name.

Previous Next Close and Save

5. All Application fees are non-refundable and non-transferable. Please be sure you have read all instructions prior to continuing with the application.



Pursuant to Public Act 18-40, the application fee is non-refundable and non-transferable.

**What You Should Know Before You Begin:**

- This application should not be used to reinstate or renew an existing registration. Contact [dcp.online@ct.gov](mailto:dcp.online@ct.gov) for further instructions.
- This application should not be used to submit an amendment to an existing registration. Amendment applications are on our website at [www.ct.gov/dcp](http://www.ct.gov/dcp).
- Please be sure you are not submitting a duplicate application for a registration you already hold or one that is pending. You can verify pending applications by searching the applicant's name at <https://www.elicense.ct.gov/Lookup/LicenseLookup.aspx>
- Please be sure you have read all instructions and requirements regarding eligibility before submitting this application.
- The fee which accompanies an application covers the cost of reviewing and processing that specific application, it cannot be refunded, even if the applicant is found ineligible.
- Varying sizes of bottles(i.e. 750ml, 1.5l) do not require a new registration. Instead, you should post additional sizes at the Liquor Control price posting website.

1. Do you understand and agree to these terms and wish to proceed with this application?

\*  Yes  No

Previous Next Close and Save

6. Private labels cannot be processed online. Please email the department at [dcp.brands@ct.gov](mailto:dcp.brands@ct.gov) for further instructions regarding private labels.

**Private Label Determination**

**Fields marked with an asterisk \* are required.**

2. Is the liquor brand label you are trying to register a private label?

\*  Yes  No

- Click on **Add** to select your current CT Shipper, Winery or Manufacturer liquor permit that the brand is to be registered under.

### Supervising Permit Confirmation

Fields marked with an asterisk \* are required.

3. Each registrant of a liquor brand must have a valid Out of State Shipper, Winery or Manufacturer Liquor Permit.

Using the grid below, add your current CT issued Shipper, Winery or Manufacturer Liquor Permit and select "Active" for status and "Shipper/Manufacturer" for relationship type.

Action	Supervisor	Status	RelationshipType
*	No Records Found		

→ Add

- The most efficient way to search for your permit is to select your three-letter license prefix (LSL, LMB, LSW etc.), enter the numeric portion (omit the preceding zeros) of your license number and click **Search**.

### Search Criteria

All data within License Lookup is maintained by the State of Connecticut, updated instantly, and considered a primary source of verification.

License Type: Acupuncturist  
Advanced Emergency Medical Technician  
Advanced Practice Registered Nurse  
Ambulatory Surgical Center  
Animal Importer

License Number: LSL 123456789

Business Name/DBA:

First Name:

Address:

City:

Country: UNITED STATES

License Status: -

Last Name:

State: - select one -

Zip:

→ Search
Clear Form

- Confirm you selected the correct permit number. Click on **Add** to select your shipper, manufacturer or winery permit that the specific brand is to be under.

	Name	Credential	Credential Description	State Agency Contact	Status	Status Reason
<span style="border: 1px solid blue; padding: 2px 5px; color: blue; text-decoration: none;">→ Add</span>		LSL.0000000000	OUT OF STATE SHIPPER LIQUOR	Department of Consumer Protection	ACTIVE	CURRENT

10. Your permit will display under Supervisor. **Status:** select "Active"; **Relationship Type:** select "Shipper Manufacturer"; **State Date:** click on "Today." Click the **OK** button

**Add DCP - Liquor Control - LBD Registrant**

Each registrant of a liquor brand must have a valid Out of State Shipper, Winery or Manufacturer Liquor Permit.

Using the grid below, add your current CT issued Shipper, Winery or Manufacturer Liquor Permit and select "Active" for status and "Shipper/Manufacturer" for relationship type.

Supervisor

LSL [REDACTED] : [REDACTED]

Status

\* Active

Approved Date

[MM/DD/YYYY] Today

RelationshipType

\* Shipper/Manufacturer

Start Date

[MM/DD/YYYY] Today

OK Cancel

11. The permit you selected will display. Click **Next** to continue.

**Supervising Permit Confirmation**

Fields marked with an asterisk \* are required.

3. Each registrant of a liquor brand must have a valid Out of State Shipper, Winery or Manufacturer Liquor Permit.

Using the grid below, add your current CT issued Shipper, Winery or Manufacturer Liquor Permit and select "Active" for status and "Shipper/Manufacturer" for relationship type.

When entering your permit number do not include any leading zeros.

Action	Supervisor	Status	RelationshipType
*	[REDACTED]	Active	Wholesaler/Distributor

Add

Previous Next Close and Save

12. You may only register one product liquor label at a time.

- Enter the individual product name as it appears on the label.
- Select the brand-product type
- Enter the proof of the product in percentage
- Select your registration type (Connecticut Manufacturer or Out of State Shipper).

NOTE: If you do not manufacture your product in CT, you must select "Out of State Shipper." **DO NOT** select Private Label

## Brand Information

Fields marked with an asterisk \* are required.

Provide the following information related to this liquor brand. Please be aware that the Department no longer requires the UNIMERC code for registration of liquor brands.

4. Enter the individual product name as it appears on the label:

\*

5. Please select the Brand Type from the list below:

\*   
BEER/MALT BEVERAGES  
BRANDY

Field required ←

6. What is the proof of the alcoholic product? Answer should be in percentage form. For example: 14.5

7. Please select the Brand Label Type from the list below:

\*   
Connecticut Manufacturer  
Out of State Shipper  
Private Label

Field required ←

13. You will be required to upload the following documents:

- A color photo of the label for the individual product you are registering. **IMPORTANT:** If the registrant's name, DBA/Trade name, is *not* listed on the label, you must also upload a letter indicating the registrant owns the product or has permission to handle the product.
- Federal label approval (COLA) for the individual product. **IMPORTANT:** If the registrant's name is *not* listed on the COLA, you must also upload a letter confirming you have permission to register and sell this product.
- Independent laboratory report or notarized statement indicating the name, alcohol type and proof.
- **Tip:** If you upload the incorrect document, click on the trashcan  icon to delete it.

***Your application cannot be processed without the required documentation and required authorization letters.***

### Brand Label Uploads

Fields marked with an asterisk \* are required.

8. Upload the label for the brand (product) requesting registration. If the label is painted and/or silk screened on the bottle, please provide a color photograph of the label.

**Please Be Advised:** If the registrant's name, DBA/Trade name, is not listed on the label, you must also upload a letter indicating the registrant owns the product or has permission to handle the product.

 [Brand Label / Documentation .rtf](#)

Select a document to upload:

Browse...  **1**

\* **2**  Upload Document

File types accepted: bmp, doc, docx, fsd, htm, jpeg, jpg, mht, msg, pdf, png, rtf, tif, tiff, txt, vsd, xls, xlsx, xml

9. Upload federal label approval (COLA) for the brand requesting registration.

**Please Be Advised:** If the registrant's name or DBA/Trade name, is not listed on the on the COLA, you must upload a letter confirming you have permission to register and sell this product.

 [Brand Label / Documentation .rtf](#)

Select a document to upload:

Browse...  **3**

\* **4**  Upload Document

File types accepted: bmp, doc, docx, fsd, htm, jpeg, jpg, mht, msg, pdf, png, rtf, tif, tiff, txt, vsd, xls, xlsx, xml

10. Upload an independent laboratory analysis or notarized statement detailing the alcohol type and proof for the product.

If you do not have the laboratory analysis, upload a notarized statement indicating, the product name, alcoholic type and proof.

 [Brand Label / Documentation .rtf](#)

Select a document to upload:

Browse...  **5**

\* **6**  Upload Document

File types accepted: bmp, doc, docx, fsd, htm, jpeg, jpg, mht, msg, pdf, png, rtf, tif, tiff, txt, vsd, xls, xlsx, xml

14. If you are **not** the manufacturer of the product you are registering, you must provide a letter from the manufacturer confirming you have permission to register and sell the product. **IMPORTANT:** You must answer "NO" to question 11 if any part of the product you are registering is imported.
- If you are the manufacturer of the product and do not sell direct to consumer, you must upload the authorization letter from the manufacturer
  - If you sell a product direct consumer, please skip down to #19

**Brand Manufacturer Qualifier**

Fields marked with an asterisk \* are required.

11. Are you the manufacturer/producer, brewer or wine maker of this liquor brand?

\*  Yes  No

If "Yes" →

**Direct To Consumer Sales**

Fields marked with an asterisk \* are required.

14. Will you be exclusively selling your product direct to consumer?

If you select "No" you will be need to provide information related to your wholesaler/distributor(s).

\*  Yes  No

If "No" →

**Brand Manufacturer Authorization**

Fields marked with an asterisk \* are required.

12. Upload the document from the manufacturer authorizing you to handle this product.

Liquor brand label.docx

Select a document to upload:

Browse...

\* File types accepted: bmp, doc, docx, fsd, htm, jpeg, jpg, mht, msg, pdf, p

Upload Document

13. Is the product manufactured in the United States?

\*  Yes  No



17. The LIW/LWB permit you selected will display under Supervisor.

- **Status:** select “Active”;
- **Relationship Type:** select “Wholesaler/Distributor”
- **In the Comments Box:** enter the territories assigned to this “Wholesaler/Distributor” exactly as listed on the appointment letter. Type in capital letters and do not abbreviate. For the entire state of CT, please type STATEWIDE
- Click the **OK** button.

Add DCP - Liquor Control - LBD Wholesaler/Distributors Grid

Identify ALL wholesaler/distributor who will be appointed for this liquor brand. Select the "Add" button and search for the wholesaler/distributor by their name or CT permit number.

After locating and adding:

- Status: select "Active"
- Approved Date: click "Today" button
- Relationship Type: select "Wholesaler/Distributor"
- Start Date: click "Today" button
- **IMPORTANT:** In the Comments box, you must type the geographic area(s) assigned to the selected wholesaler/distributor as it is listed in the appointment letter. Please type in CAPITAL letters and do not abbreviate. For the entire state of Connecticut, please type STATEWIDE.

Supervisee

LIW

Status

\* Active

Approved Date

/ / (MM/DD/YYYY) Today

RelationshipType

\* Wholesaler/Distributor

Start Date

/ / (MM/DD/YYYY) Today

Comments

NEW HAVEN, NEW LONDON, HARTFORD

In the Comments box, type the geographic area(s) assigned to this wholesaler/distributor as it is listed in the appointment letter. Type in capital letters and do not abbreviate. For the entire state of CT, type STATEWIDE.

OK Cancel

18. The table will list all the wholesalers/distributors you selected.

- Upload one file containing the appointment letters for each wholesaler/distributor you listed. Click **Next** to continue
- Be sure you have selected the LIW/LWB credential

- **Tip:** Should you need to delete the entry, click on the trashcan  to the left of the entry under **Action**. If the entry is correct, but you would like to view or change the information entered, click on the paper & pencil  icon.

Distributor Information

Fields marked with an asterisk \* are required.

15. Identify ALL wholesaler/distributor who will be appointed for this liquor brand. Select the "Add" button and search for the wholesaler/distributor by their name or CT permit number.

After locating and adding:

- Status: select "Active"
- Approved Date: click "Today" button
- Relationship Type: select "Wholesaler/Distributor"
- Start Date: click "Today" button
- **IMPORTANT:** In the Comments box, you must type the geographic area(s) assigned to the selected wholesaler/distributor as it is listed in the appointment letter. Please type in CAPITAL letters and do not abbreviate. For the entire state of Connecticut, please type STATEWIDE.

Action	Supervisee	Status	RelationshipType
 	LIW. [REDACTED]	Active	Wholesaler/Distributor
 	LIW. [REDACTED]	Active	Wholesaler/Distributor

\* 

16. Upload the appointment letter(s) for each wholesaler/distributor you identified for this product.

Each letter must be on letterhead, be signed and dated, list the entire name of the product(s) and geographic area(s) assigned.

 [REDACTED].png

Select a document to upload:

\*  

File types accepted: [bmp](#), [doc](#), [docx](#), [fsd](#), [htm](#), [jpeg](#), [jpg](#), [mht](#), [mov](#), [msg](#), [pdf](#), [png](#), [rtf](#), [tif](#), [tiff](#), [txt](#), [vsd](#), [xls](#), [xlsx](#), [xml](#)

Previous **Next** 

19. If your business uses a different name( DBA/Trade Name) answer “Yes” and upload documentation indicating the use of such name. Typically, your basic permit issued by the ATF will have this information.

### Brand DBA Qualifier

Fields marked with an asterisk \* are required.

17. Does the brand label identify your business under a different name (DBA/Trade Name) than the one used in this application?

\*  Yes  No

Previous

Next

Close and Save

### Brand DBA Documentation

Fields marked with an asterisk \* are required.

18. Upload documentation indicating a business name (DBA/Trade Name) to be used by the registrant. In most cases, a copy of your basic permit issued by the Bureau of Alcohol Tobacco and Firearms will have this information.

  docx

Select a document to upload:

Browse... 

\* 

File types accepted: bmp, doc, docx, fsd, htm, jpeg, jpg, mht, mov, msg, pdf, png, rtf, tif, tiff, txt, vsd, xls, xlsx, xml

Previous

Next

Close and Save

20. Please provide the email address to be used for all correspondence from this office related to the brand you are registering. The email address you provide will be used to send deficiency notices, approval and renewal notices. Click **Next** to continue.

### Email Confirmation

19. All communication for this liquor brand application, including approval, will be sent via email. Please provide the email address to be used for this application:

Previous

Next

Close and Save

21. Attest that the information provided within the application is true by selecting "Yes" and click **Next**

### Online Application Attestation

Fields marked with an asterisk \* are required.

20. I attest under the penalties of the Connecticut General Statutes, Sections 53a-157b and 30-47 that the information contained herein is true. I understand that willfull misinformation or omission of facts on this application may result in criminal prosecution and/or revocation, suspension, or refusal to renew this permit.

\*

Previous

Next

Close and Save

22. Review the responses to each question on the application. To print a copy of the completed application click **Print Review**, located in the top right corner. To continue, click on **Add to Invoice**.

**Review** → Print Review

---

**Fees**

Initial Permit Fee	<b>\$200.00</b>
	<b>Total Fees: \$200.00</b>

---

**Brand Application Start**

**PAYMENT INSTRUCTIONS:** To pay for this submission, add the application fee to your invoice and proceed to the payment page.

If you wish to apply for more liquor brand registrations and pay for all submissions in one payment, add this application fee to the invoice and then proceed to Online Services, Initial Application and select the Liquor Brand application again.

---

**Application Confirmation**

1. Do you understand and agree to these terms and wish to proceed with this application?

Yes

---

**Private Label Determination**

2. Is the liquor brand label you are trying to register a private label?

No

PreviousAdd to Invoice ←

Close and Save

23. Click the green **Pay Invoice** button to continue. NOTE: Should you need to remove this item from Checkout, click on the trash can icon  under the Description bar.

Welcome, **HANITSAH/MIHAL/EE** [Logout](#) \$200.00 [Checkout](#)

**ct.gov** | STATE OF CONNECTICUT HOME MY ACCOUNT ONLINE SERVICES ▾

Invoice → [Pay Invoice](#) [Print](#)

Invoice Date: **08/20/2024**  
Invoice # **07703148**

**This item was successfully added to the invoice**

Select **Pay Invoice** above to complete this transaction  
To add additional transactions to the invoice, select a command from the Online Services menu

[State of Connecticut Online Enterprise eLicense Site](#)

**HANITSAH/MIHAL/EE**  
**100 CAPITAL AVE**  
**HANITSAH/MIHAL/EE CT 06106-1000**

Description	Amount
 <b>Application - LIQUOR BRAND LABEL</b>	
Initial Permit Fee	\$200.00
	Subtotal: \$200.00
	<b>Total: \$200.00</b>

→ [Pay Invoice](#)

24. Enter the credit card or check draft (echeck) information, name, address, telephone number and email address and click **Submit Payment**.

Welcome, [REDACTED] Logout Checkout

**ct.gov** | STATE OF CONNECTICUT HOME MY ACCOUNT ONLINE SERVICES

### Invoice Payment Back to Invoice

**Total:** \$ [REDACTED]



**Credit Card Instructions:**  
\*Where is CVV code?

**Check Draft Instructions:**  
\*Where is Account & Routing #?

\*\* Indicates a value is required

**\*\* Payment Type**  Credit Card  Check Draft

**\*\* Account Owner** Personal

**\*\* Credit Card Type**

**\*\* Card Number**

**\*\* Expiration Month / Year**

**\*\* CVV Code**

**\*\* First Name**

**\*\* Last Name**

**Company Name**

**Attention**

**\*\* Address**

**Address**

**\*\* City**

**\*\* State** Connecticut

**\*\* Zip** 06776-2009

**\*\* Country** UNITED STATES

**\*\* Phone**

**\*\* E-mail Address**

25. Once the transaction is complete, you will receive a payment approved message. Click **Print Receipt** for your records. In addition, an email confirmation will be sent confirming your payment.

Welcome, MARITSA MORALES [Logout](#) \$0.00 [Checkout](#)

**ct.gov** | STATE OF CONNECTICUT HOME MY ACCOUNT ONLINE SERVICES ▾

---

Payment Receipt

[Print Receipt](#)

State of Connecticut  
Online Enterprise eLicense Site

---

Date: 3/4/2020

---

MARITSA MORALES

Approved!

You have been charged **\$200.00** to the [Department of Consumer Protection](#)

Please print a copy for your records from the button above.  
This receipt is not a license or an authorization to do business.

Description	Amount
<b>Application - LIQUOR BRAND LABEL</b>	
Initial Permit Fee	\$200.00
Subtotal:	\$200.00
Total:	\$200.00
Amount Paid:	(\$200.00)
<b>Amount Due:</b>	<b>\$0.00</b>

**Invoice Receipt**

 donotreplylicense3@ct.gov  
To: [redacted]

[Reply](#) [Reply All](#) [Forward](#) [More](#)

Dear [redacted],

Below is your detailed paid invoice. Please print a copy for your records. This receipt is not a license or an authorization to do business.

Thank you.

State of Connecticut

Item #	Description	Amount
<b>Application - LIQUOR BRAND LABEL</b>		
2649562	Initial Permit Fee	\$200.00
Subtotal:		\$200.00
Total:		\$200.00
Amount Paid:		(\$200.00)
<b>Total Amount Due:</b>		<b>\$0.00</b>