

**APPLICATION FOR GROWLER (G)  
ENDORSEMENT**

NEBRASKA LIQUOR CONTROL COMMISSION  
301 CENTENNIAL MALL SOUTH  
PO BOX 95046  
LINCOLN, NE 68509-5046  
PHONE: (402) 471-2571  
FAX: (402) 471-2814  
Website: www.lcc.nebraska.gov

Office Use
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- **Include application fee of \$300** check made payable to the Nebraska Liquor Control Commission or you may pay online at [www.ne.gov/go/NLCCpayport](http://www.ne.gov/go/NLCCpayport)
- **MUST** be a holder of a Class C, CK, CCS or CKCS liquor license; or making application for same
- **MUST** include photo copy of holder's trade name, logo or unique mark used on the containers

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• **Standards that shall be met for the sale of Growlers to the final consumer for off premise consumption:**

- Sale occurs on the licensed premises of the licensee during the hours the licensee is authorized to sell beer;
- Licensee uses sanitary containers purchased by the customer from the licensee or exchanged for containers previously purchased by the customer from the licensee;
- Containers shall prominently display the endorsement holder's trade name or logo or some other mark that is unique to the endorsement holder;
- Shall hold no more than thirty-two (32) ounces;
- Licensee seals the container in a manner designed so that it is visibly apparent whether the sealed container has been tampered with or opened or seals the container and places the container in a bag designed so that it is visibly apparent whether the sealed container has been tampered with or opened;
- Licensee provides a dated receipt to the customer and attaches a copy of the dated receipt to the sealed container or, if the sealed container is placed in a bag, to the bag

PAYMENT TYPE _____ AMOUNT: _____ RECEIVED: _____ RECEIPT# _____	Office use only	BARCODE LABEL
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**LIQUOR LICENSE #** \_\_\_\_\_ **CLASS TYPE** \_\_\_\_\_

**LICENSEE NAME** \_\_\_\_\_

**TRADE NAME** \_\_\_\_\_

**PREMISE ADDRESS** \_\_\_\_\_

**CITY** \_\_\_\_\_

**CONTACT PERSON** \_\_\_\_\_

**PHONE NUMBER OF CONTACT PERSON** \_\_\_\_\_

**EMAIL ADDRESS OF CONTACT PERSON** \_\_\_\_\_

\_\_\_\_\_  
Signature of Licensee

State of Nebraska  
County of \_\_\_\_\_ The foregoing instrument was acknowledged before me this

\_\_\_\_\_ by \_\_\_\_\_  
Date name of person acknowledged signing document

\_\_\_\_\_  
Notary Public Signature

Affix Seal