

BEVERAGE MANUFACTURER / DISTRIBUTOR REGISTRATION FORM

Please complete and return **both pages** to Reg.CRVLLabeling@CalRecycle.ca.gov or mail to
CalRecycle - Registration Unit, 1001 I Street, MS-9A, Sacramento, CA 95814 or via fax at (916) 319-7400

Doing Business As (DBA) Name:

Legal Name:

Federal Tax ID (Employer Identification Number):

ABC Certificate of Compliance or Direct Shippers Permit # (Out-of-state Beer Manufacturers & Wineries only)

Physical Business Address

Mailing Address (if different from physical address)

Street:

Street:

City, State Zip:

City, State Zip:

California Warehouse Location(s) (if applicable)
(Attach additional sheets if necessary)

Other California Address (if applicable)
(Examples: Company owned bottling facility or sales office)
(describe) _____

Check one: Rented Leased Owned

Street:

Street:

City, State Zip:

City, State Zip

Primary Point of Contact

Secondary Point of Contact

Mr. Mrs. Ms. Other: _____

Mr. Mrs. Ms. Other: _____

Name:

Name:

Title:

Title:

Phone:

Phone:

Email:

Email:

Ownership Structure: Corporation Limited Liability Company Other: _____

This company is a (check all that apply): Brewery Distilled Spirit Manufacturer Winery None of these
Date company began sales or transfers of beverages in single use containers in California: _____ (month/year)

Are free beverage product samples offered or donated in California? Yes No

Are you selling direct through your website or other E-commerce platforms? Yes No

Provide the types of beverage products, their container types, and container sizes offered for sale or transfer, or proposed to be offered for sale or transfer in California: *(Check all that apply)*

Product Line:

- Beer or Malt Beverages Distilled Spirits Wine Wine/Distilled Spirit Coolers Coffee/Tea Drinks
- Carbonated Soft Drinks Non-Carbonated Soft Drinks Carbonated Water Non-Carbonated Water
- Sport Drinks 100% Vegetable Juice *(Size in oz)* _____ 100% Fruit Juice *(Size in oz)* _____
- Carbonated Fruit Drinks Non-Carbonated Fruit Drinks Other *(Describe):* _____

Container Material Type:

- Aluminum Glass Bi-Metal
- Wine or Distilled Spirit in Box, Bladder or Pouch

- Plastic: #1 PET #2 HDPE #3 PVC
- #4 LDPE #5 PP #6 PS #7 Other

Other Material *(Describe):* _____

Refillable:

(Empty beverage containers which are returned to your place of business to be refilled and resold)

- All None Some

Sizes:

- Under 24 ounces 24 ounces or over

Do you bottle or can your own beverages? (Canning includes taproom sealed crowlers) All None Some

If **None** or **Some**, provide the name and contact information for your beverage suppliers, co-packers and/or bottlers
(Attach additional sheets if needed):

Company Name

Contact Person

Phone

Address

Who do you sell or transfer beverages directly to in California? *(Check all that apply)*

- Retailers Restaurants/Bars Consumers Common Carriers *(Planes, trains, etc.)*
- Distributors *(Provide information below)* Other Describe: _____

Company Name

Contact Person

Phone

Address

Provide any additional information regarding your business practice or products in the space below:
