



STATE OF NEW JERSEY
DEPARTMENT OF LAW AND PUBLIC SAFETY
DIVISION OF ALCOHOLIC BEVERAGE CONTROL
P.O. BOX 087, 140 EAST FRONT STREET
TRENTON, NJ 08625-0087

**MUNICIPAL ISSUED LICENSE
RENEWAL APPLICATION**



ABC License Renewal Application for 2026-2027 License Term

Licensee must complete and file the 2026-2027 Renewal Application form:

- Municipal Renewal License Application
(Municipal fee must be a check or money order in the amount of \$200.00 payable to The Borough of Deal).
- State Division of Alcoholic Beverage Control Online Application Renewal Form
<https://www.njoag.gov/about/divisions-and-offices/division-of-alcoholic-beverage-control-home/>

NOTE: TO BE A COMPLETE FILING YOU MUST SUBMIT THE MUNICIPAL RENEWAL APPLICATION, \$200 MUNICIPAL FILING FEE AND COMPLETE THE STATE ONLINE RENEWAL APPLICATION PROCESS PROVIDING THE \$200 STATE FILING FEE.

RETAIL LICENSE RENEWAL APPLICATION FOR 2026-2027 LICENSE TERM

LICENSE NUMBER: _____

ISSUING AUTHORITY: _____

LICENSE TYPE: _____

LICENSE NAME: _____

TRADE NAME(S): _____

LICENSED PREMISES ADDRESS: _____

MAILING ADDRESS (If applicable): _____

1. IS THIS LICENSE BEING ACTIVELY USED AT AN ACTUAL PREMISE? ☐ YES ☐ NO
2. IF NO, ON WHAT DATE WAS THE LICENSE LAST USED? _____
3. DOES THE APPLICANT OR ANY OTHER PERSON MENTIONED IN THIS APPLICATION, OR ANY PERSON HAVING A BENEFICIAL INTEREST IN THE LICENSED BUSINESS, HOLD OFFICE IN THE UNIT OF GOVERNMENT ISSUING THE LICENSE? ☐ YES ☐ NO
4. IF YES, PLEASE SPECIFY THE FOLLOWING: NAME, TITLE OF OFFICE, AND THE MUNICIPALITY IN WHICH THEY HOLD OFFICE.

5. IN THE PAST 12 MONTHS, HAVE YOU ENTERED INTO AN AGREEMENT IN WHICH YOU OFFERED THE LICENSE OR ANY FINANCIAL INTEREST IN THE LICENSE AS COLLATERAL OR SECURITY TO A PERSON OR ENTITY NOT NAMED IN THE APPLICATION ☐ YES ☐ NO
6. IF SO, HAVE YOU AMENDED QUESTIONS 9.1, 9.2 OR 9.3 OF YOUR APPLICATION TO REFLECT THIS ARRANGEMENT: ☐ YES ☐ NO
7. IN THE PAST 12 MONTHS, HAS THE LICENSEE BEEN NAMED AS A PARTY TO A LAWSUIT, ARISING FROM CONDUCT IN NEW JERSEY, THAT HAS NOT BEEN DISMISSED AND IN WHICH IT IS ALLEGED THAT THE LICENSEE SERVED AN INTOXICATED PATRON? ☐ YES ☐ NO

STATE OF _____)

COUNTY OF _____)

SS:

PRINT FULL NAME

(INDIVIDUAL LICENSEE, PARTNER, PRESIDENT, VICE PRESIDENT OF CORP. OR MANAGING MEMBER OF LLC) BEING DULY SWORN ACCORDING TO LAW, UPON HIS/HER OATH DEPOSES AND SAYS: (1) INFORMATION CONTAINED ON THIS LICENSE RENEWAL APPLICATION IS CONSISTENT WITH THE MOST COMPLETE FULL APPLICATION ON FILE AS UPDATED OR AMENDED AND, IS TRUE AND COMPLETE. (2) IF THE LICENSEE IS A CORPORATION, LLC OR A PARTNERSHIP, I AM DULY AUTHORIZED TO FILE.

I CERTIFY THAT THE FOREGOING STATEMENTS MADE BY ME ARE TRUE. I AM AWARE THAT IF ANY OF THE FOREGOING STATEMENTS MADE BY ME ARE WILLFULLY FALSE, I AM SUBJECT TO PUNISHMENT.

SIGNATURE

(SIGNATURE OF INDIVIDUAL LICENSEE, PARTNER, PRESIDENT,
VICE PRESIDENT OF CORP. OR MANAGING MEMBER OF LLC)

TITLE

(CORPORATE SEAL IF APPLICABLE)

*****RESERVED FOR MUNICIPAL USE*****

MUNICIPAL FEE: \$ 200.00 [STATE RENEWAL ONLINE/FEE \$ 200.00]

NJ ABC FILE #: _____

ARE SPECIAL CONDITIONS IMPOSED FOR THE 2025-2026 TERM? ☐ YES ☐ NO

DATE OF COMMISSIONERS MEETING _____ **DATE RENEWAL GRANTED** _____ **OR DENIED** _____

MUNICIPAL CLERK:

SIGNATURE _____

DATE _____

NAME OF ISSUING AUTHORITY: JO ANNA MYUNG, MUNICIPAL CLERK