



On-Premises Brand Promotion Notification Form

A licensee must submit notification of an event at least five (5) business days prior to conducting an on-premises brand promotion pursuant to [Administrative Order of October 27, 1999](#). Use of this form is optional and a licensee may submit written notification of the event without using this form. Email notifications to MLCCMWApplications@michigan.gov or fax to 517-763-0059

Part 1 - Licensee Conducting On-Premises Brand Promotion (Wholesaler, Manufacturer, Outstate Seller, or Broker Licensee)

Individuals, please state your legal name. Corporations or Limited Liability Companies, please state your name as it is filed with the State of Michigan Corporation Division.

Licensee name:		
Address:		
City:	State:	Zip Code:
Contact Name:	Phone:	Email:

Part 2 - On-Premises Brand Promotion Events

You may attach a separate sheet with information about additional on-premises brand promotions, if necessary. Include all of the event details below when reporting additional events on a separate sheet.

On-Premises Brand Promotion Event 1		
<input type="text"/>	<input type="text"/>	<input type="text"/>
Event Date	On-Premises Retailer Licensee Name	On-Premises Retailer License Number
<input type="text"/>	<input type="text"/>	<input type="text"/>
Starting Time of Event	Address	City & Zip Code
<input type="text"/>	<input type="text"/>	<input type="text"/>
Ending Time of Event	Name of Salesperson/Vendor Representative Conducting Promotion	Salesperson/Vendor Rep. License Number
<input type="text"/>	<input type="text"/>	
Brand or Brands Represented at Promotion Event	Brief Description of Promotion Event	

On-Premises Brand Promotion Event 2		
<input type="text"/>	<input type="text"/>	<input type="text"/>
Event Date	On-Premises Retailer Licensee Name	On-Premises Retailer License Number
<input type="text"/>	<input type="text"/>	<input type="text"/>
Starting Time of Event	Address	City & Zip Code
<input type="text"/>	<input type="text"/>	<input type="text"/>
Ending Time of Event	Name of Salesperson/Vendor Representative Conducting Promotion	Salesperson/Vendor Rep. License Number
<input type="text"/>	<input type="text"/>	
Brand or Brands Represented at Promotion Event	Brief Description of Promotion Event	

On-Premises Brand Promotion Event 3

<input type="text"/>	<input type="text"/>	<input type="text"/>
Event Date	On-Premises Retailer Licensee Name	On-Premises Retailer License Number
<input type="text"/>	<input type="text"/>	<input type="text"/>
Starting Time of Event	Address	City & Zip Code
<input type="text"/>	<input type="text"/>	<input type="text"/>
Ending Time of Event	Name of Salesperson/Vendor Representative Conducting Promotion	Salesperson/Vendor Rep. License Number
<input type="text"/>	<input type="text"/>	
Brand or Brands Represented at Promotion Event	Brief Description of Promotion Event	

On-Premises Brand Promotion Event 4

<input type="text"/>	<input type="text"/>	<input type="text"/>
Event Date	On-Premises Retailer Licensee Name	On-Premises Retailer License Number
<input type="text"/>	<input type="text"/>	<input type="text"/>
Starting Time of Event	Address	City & Zip Code
<input type="text"/>	<input type="text"/>	<input type="text"/>
Ending Time of Event	Name of Salesperson/Vendor Representative Conducting Promotion	Salesperson/Vendor Rep. License Number
<input type="text"/>	<input type="text"/>	
Brand or Brands Represented at Promotion Event	Brief Description of Promotion Event	

On-Premises Brand Promotion Event 5

<input type="text"/>	<input type="text"/>	<input type="text"/>
Event Date	On-Premises Retailer Licensee Name	On-Premises Retailer License Number
<input type="text"/>	<input type="text"/>	<input type="text"/>
Starting Time of Event	Address	City & Zip Code
<input type="text"/>	<input type="text"/>	<input type="text"/>
Ending Time of Event	Name of Salesperson/Vendor Representative Conducting Promotion	Salesperson/Vendor Rep. License Number
<input type="text"/>	<input type="text"/>	
Brand or Brands Represented at Promotion Event	Brief Description of Promotion Event	

Please return this completed form to:
Michigan Liquor Control Commission
Mailing address: P.O. Box 30005, Lansing, MI 48909
Overnight packages: 2407 N. Grand River Ave, Lansing, MI 48906
Email to: MLCCMWApplications@michigan.gov or Fax to: 517-763-0059