



Application Copy

File Number: 152908

Job Type: Renewal Application

LICENSE # RES-25-113463	APPLICATION DATE RECEIVED 2026-05-22
LICENSE TYPE On-Premises: Beer & Wine	LICENSEE MosonBray, LLC
AGENT NAME	EFFECTIVE DATE 2025-05-27
EXPIRES 2026-05-26	STATUS Active
PREMISES NAME Lakes Region Brewing	
NEW SECONDARY LICENSE(S) None selected	
PREMISES TYPE Restaurant (not Class A)	PREMISES NAME Lakes Region Brewing
OPERATOR	
PHYSICAL ADDRESS 333 ROOSEVELT TRL CASCO ME 04015	
MAILING ADDRESS PO Box 25 South Casco ME 04077	
CONTACT NAME Michael Bray	PREFERRED CONTACT METHOD Phone

CONTACT PHONE
(207) 595-0222

ALTERNATE PHONE

FAX

EMAIL

QUESTIONS

On-Premises: Beer & Wine

1. Is your business (including any DBA) registered and in good standing with the Maine Secretary of State?

Answer "No" if you are a Sole Proprietor.

Yes

202507067DC

2. Does the licensee or applicant(s) have any interest in any other Maine Liquor License?

Yes

MosonBray, LLC
SMB-25-112670

3. Is the applicant/licensee an individual, partnership, or association?
(Not a corporation or LLC)

No

4. Are all licensees/applicants residents of the State of Maine?

No

Michael Bray
49% owner, brewer

5. Is your license for a club with a membership?

No

6. Is your license application for a vessel?

No

7. Do you have a valid and current health license issued by Maine Department of Health and Human Services OR the Department of Agriculture?

Yes

(document uploaded)

8. Do you have a license from the Office of the State Fire Marshal? Contact (207) 626-3870 to determine whether licensure is necessary.

No

9. Will any law enforcement officer directly benefit financially from this license?

No

10 Is the licensee or applicant for a license receiving, directly or indirectly, any money, credit, thing of value, endorsement of commercial paper, guarantee of credit or financial assistance of any sort from any person or entity within or without the State, if the person or entity is engaged, directly or indirectly, in the manufacture, distribution, wholesale sale, storage or transportation of liquor.

Yes

MosonBray, LLC
SMB-25-112670

11 Is the licensee/applicant(s) directly or indirectly giving aid or assistance in the form of money, property, credit, or financial assistance of any sort, to any person or business entity holding a liquor license granted by the State of Maine?

Yes

MosonBray, LLC
SMB-25-112670

12 What is the full name and date of birth of the person managing this premises?

Tor Moson



13 Has any of the listed applicants, an immediate family member of an applicant, or an employed manager been denied a liquor license or had a liquor license revoked within the last 5 years?

No

14 Is any of the listed applicants the spouse, father, mother, child or other immediate family member of a person whose liquor license has been revoked or denied in the last 6 months?

No

15 Has any licensee/applicant or employed manager ever been convicted of any violation of the liquor laws in Maine or any State of the United States within the last 5 years?

No

16 Has the licensee/applicant(s) or manager ever been convicted of any violation of any law, other than minor traffic violations, in Maine or any State of the United States?

No

17 Does the licensee/applicant have any arrangement such as a lease where rent is based on sales, an agreement where another party receives a portion of the revenue or profits from the business, or a right to acquire an ownership interest in the business?

No

18 At which address are your business records located?

David L. Brandt
1288 Roosevelt Trail
P.O. Box 437
Raymond, ME 04071

19 What will be your business hours? Please indicate each day's open and close times.

Thursday 4-9pm
Friday, Saturday, Sunday, and Holiday Mondays 11am-12am

20 Please provide the name and distance from the premises to the nearest school, school dormitory and place of place of worship, measured from the main entrance of the premises to the main entrance of the school, school dormitory and place of worship by the ordinary course of travel.

0.6 miles

Casco Alliance Church

21 Is your application for a Hotel or Bed & Breakfast?

No

22 What is the gross food income for the licensure period that will end on the expiration date?

██████████

23 What is the gross income from beer, wine, and spirits for the licensing period ending on the expiration date?

██████████

24 Do you have a food menu?

Yes

(document uploaded)

25 How many seats do you have? Include indoor and outdoor seating.

79

26 How many bathrooms do you have available to patrons?

2

27 Do you currently have any advertising or sponsorship agreements with a wholesale licensee or certificate of approval holder (including agreements for signage, naming rights, event sponsorships or branded areas)?

No

28 Describe each area of the premises where alcoholic beverages will be served, consumed, or stored.

Include all interior and exterior areas (e.g., dining rooms, bars, patios, decks, function rooms, etc.) and use names or labels that correspond to your submitted floor plan.

Served: Service Bar

Consumed: Area in front of Service Bar, Tap Room Dining Area, Outdoor Licensed Premise

Stored: Serving Tank area, Under Service Bar and in Refer next to service bar.

DOCUMENTS

TYPE	FILE NAME	DESCRIPTION
Maine Health or Agriculture License	IMG_4848.jpg	DHHS License
Food Menu	LRB Menu 4.24.2026.docx	Menu
Premises Floor Plan	IMG_4850.jpg	Floor Plan
Supplemental Ownership Form	102 Supplemental Ownership Form and Affidavit-3.pdf	Ownership Form

APPLICANT

MosonBray, LLC

DECLARATION

- I certify that I am the applicant as described in this application, or that I am duly authorized to submit this application on the applicant's behalf.

All information provided in this application is accurate and correct. I understand that false statements made on this application are punishable by law. Knowingly supplying false information on this application is a Class D Offense under Maine's Criminal Code, punishable by confinement of up to one year, or by monetary fine of up to \$2,000 or by both.