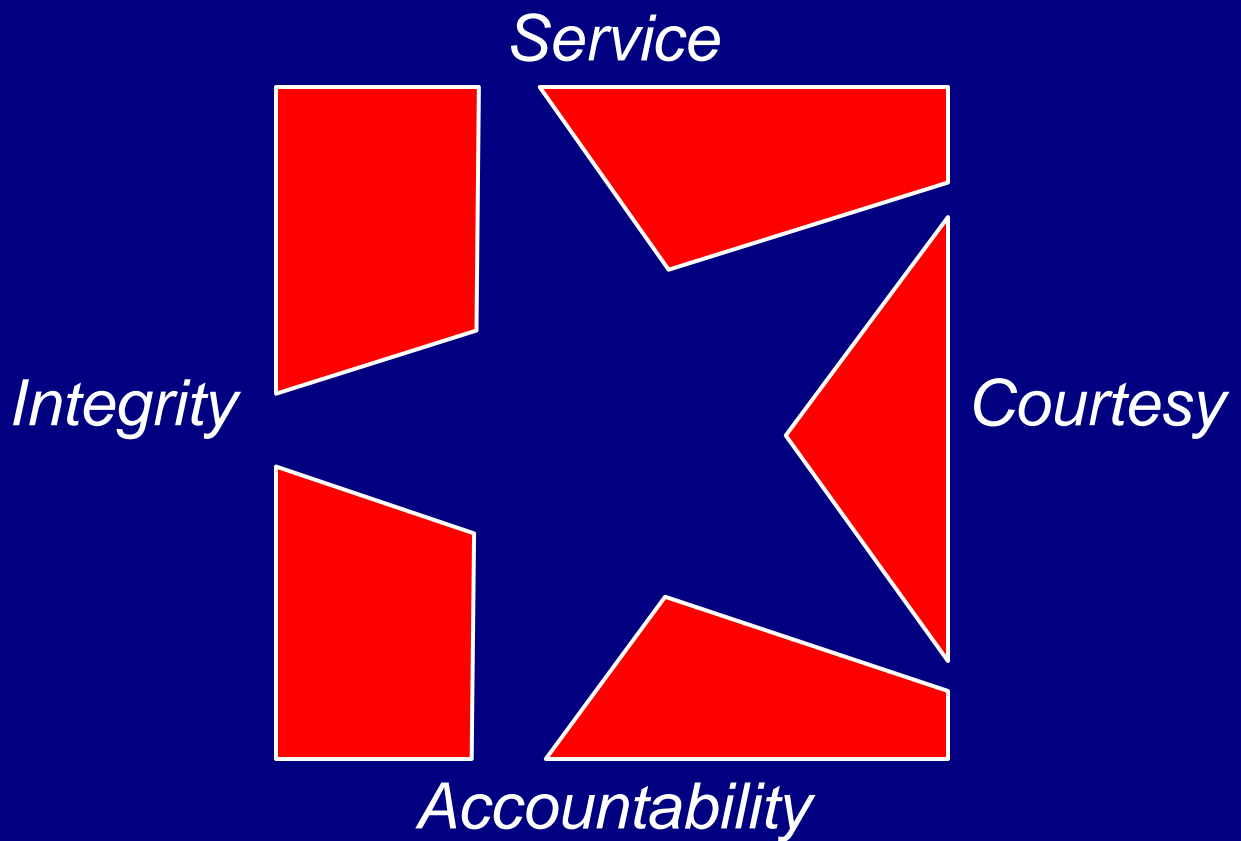


# TEXAS ALCOHOLIC BEVERAGE COMMISSION

## APPLICATION GUIDE FOR RETAILERS





Dear Applicant,

The Application Guide for Retailers was designed to offer general information and to assist you through the application process for an alcoholic beverage license or permit.

Use this guide for clarification on any questions you may have or call your local TABC office for assistance. Visit our website at [www.tabc.state.tx.us](http://www.tabc.state.tx.us) for valuable information and as an additional resource.

Along with your license or permit you will receive a customer service satisfaction survey. We value your comments and rely on your suggestions to improve the application process.

Together, we seek a safe and responsible Texas.

A handwritten signature in black ink that reads "Amy Harrison". The signature is written in a cursive, flowing style.

Amy Harrison,  
Director, Licensing Division

*Please note this guide is subject to change.*  
**Contact your local TABC office for the most current information.**

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## GUIDE FOR RETAILERS – OVERVIEW

### GENERAL COMPLETION INFORMATION

- **Obtain the appropriate application packet(s)** from your local TABC office or online at [www.tabc.state.tx.us](http://www.tabc.state.tx.us).
- **Carefully read all instructions before completing the forms.**
  - Type or print in black or blue ink.
  - Enter “N/A” for questions that do not apply.
- **Applications must be signed *before* a notary public.**
  - Signatures must be original.
  - Signatures and dates are not valid after 90 days of notary date.
- **You may be asked to provide additional information** or documents to support your application.
- **If you have any questions**, contact your local TABC office or visit our web site at [www.tabc.state.tx.us](http://www.tabc.state.tx.us).

**Note:** Allow 45-60 days for application processing.

### 60-DAY SIGN FOR ON-PREMISE LICENSE/PERMIT

- You may be required to **post a 60-day sign at your location address.**
- **If the location has not been previously licensed** for on-premise consumption of alcoholic beverages 24 months before the initial application review by your local TABC office:
  - you must prominently post an outdoor sign at the location for 60 days prior to the receipt of your application at TABC headquarters;
  - this sign gives public notice of your intent to seek a license/permit;
  - failure to display this sign could result in the delay in the issuance of your license/permit.
- **Other sign requirements may be required** for your location.
- Contact your local TABC office to obtain signs that are necessary.

## ACTIVE LICENSES/PERMITS AT YOUR PROPOSED LOCATION

If there is an active license/permit at your proposed location, the licensee/permittee may remain operational while your application is processed by:

- personally submitting the license/permit to your local TABC office and maintaining responsibility of the licensed location.

**Note:** You, the applicant, may *not* operate using another person's license/permit.

## INSPECTION OF LOCATION

TABC inspections of proposed licensed locations may be required. Situations that may require an inspection:

- if you are applying for a Food and Beverage Certificate,
- if the proposed location has not been licensed in the prior six months,
- if a diagram of the proposed licensed premise is needed.

## INTERVIEWS WITH TABC STAFF

Your local TABC staff holds interviews for new applicants and others requesting education. These interviews are to obtain information on your application as well as explain the responsibilities associated with the license/permit and answer your questions. You will obtain literature as well as required signs during your interview. Please allow approximately one hour for these interviews.

- The following people should come to the interview:
  - the applicant (if applicant is not going to conduct the day-to-day business operations, the manager of the proposed premises should also come);
  - the general partner or managing partner of the partnership or limited partnership;
  - an officer (preferably the president) of the corporation or manager of the limited liability company;
  - a venturer of the joint venture;
  - a trustee of the trust;
  - a primary public official of the city/county/university.
- The local TABC will contact you to schedule your interview to discuss your application and responsibilities.

## FEES AND SURCHARGES

Please refer to Exhibit I for fees and surcharges associated with your license/permit. Once your license/permit is issued, no fees or surcharges will be refunded or prorated.

## COUNTY JUDGE HEARING

Upon the completion and review of your application packets, all Beer license and Wine and Beer permit applicants will be required to appear before the county judge for a hearing. TABC staff will acknowledge the review of your application to the judge for hearing. Please refer to TABC Code, Section 61, and TABC rules 33.13 and 37.4.

## TABC HEADQUARTERS PROCESSING

Your application will be forwarded to TABC Austin headquarters for final processing. Your local TABC office will continue as your primary contact for continued communication until final action is taken on your application.

## LICENSE/PERMIT ISSUED

A license/permit holder is responsible for **updating all records and information** contained in their application. If any license/permit holder has changes in any information contained in the last filed application, please contact your local TABC office for reporting procedures.

## SPECIAL TAX COLLECTED

The National Revenue Center collects occupational taxes from state retailers and wholesalers.

**If you sell or handle any type of alcoholic beverages**, you must pay an annual special occupational tax for each location where you are selling/handling alcoholic beverages.

**For detailed information and taxpayer assistance**, contact the National Revenue Center (NRC) at:

Alcohol and Tobacco Tax and Trade Bureau (TTB)  
National Revenue Center  
50 Main Street  
Cincinnati, OH 45202  
513-684-2979 or 1-800-937-8864  
Web site - [www.ttb.gov](http://www.ttb.gov) e-mail - [ttbtaxstamp@ttb.treas.gov](mailto:ttbtaxstamp@ttb.treas.gov)

**GUIDELINES FOR  
OFF-PREMISE LICENSE/PERMIT  
PREQUALIFICATION PACKET**



## **GUIDELINES FOR OFF-PREMISE LICENSE/PERMIT PREQUALIFICATION PACKET (FORM L-OFF 5/2009)**

### **GENERAL INSTRUCTIONS:**

- Type or print in black or blue ink.
- Enter “N/A” for questions that do not apply.

### **LOCATION INFORMATION**

#### **TYPE OF OFF-PREMISE LICENSE/PERMIT**

- Check the box to indicate which license/permit for which you are applying. For more information on “License and Permit Descriptions” see Exhibit II.

**NOTE:** Before beginning your application process, we suggest you check with your city/county to ensure your location is wet for the license/permit you are seeking.

#### **INDICATE PRIMARY BUSINESS AT THIS LOCATION**

- Check the appropriate box to indicate the primary business activity at this location. If you check the “Miscellaneous” box, you must enter your primary business type.

#### **TRADE NAME**

- Trade name should indicate the name of your business at this location.

#### **LOCATION ADDRESS**

- Enter the physical address of the location, including city, county, state and nine-digit ZIP Code.

#### **MAILING ADDRESS, PHONE NUMBERS AND E-MAIL ADDRESS**

- Enter mailing address, including city, state, and nine-digit ZIP Code.
  - Your mailing address **may not** be the address of a licensing or bookkeeping service.
- Enter your primary business phone number, including area code.
- Enter an alternate phone number, including area code. The alternate number may be a second business, home, or cell phone number but **may not** be a licensing or bookkeeping service phone number.
- Enter your current e-mail address.



- **If your mailing address, phone numbers or e-mail address change(s)** after you submit your application, send written notice to TABC Headquarters in Austin. It is imperative that you keep this information current, as this will be the information used for all correspondence on your license/permit application.

## OWNER INFORMATION

### TYPE OF OWNER

- Check the box to indicate your type of ownership. Owner refers to the type of entity that will hold the license/permit.
  - If you check the box labeled “Other,” describe the type of owner for the business, i.e., trade associations, etc.

### OWNER OF ENTITY/APPLICANT

- For “Owner of Entity/Applicant,” enter the name of the owner/applicant of the business. If the entity is registered with the Secretary of State, use the same name.
- Certain individual positions with the entity are required to be listed. See chart below to determine which individuals with the business entity must be disclosed.

**Note:** These same individuals with titles will be in your publication. For further information, see the Publisher’s Affidavit section on page 9.

<b>If the applicant is a (an):</b>	<b>then list:</b>
individual	<ul style="list-style-type: none"> <li>• the individual owner of the business</li> </ul>
partnership	<ul style="list-style-type: none"> <li>• all partners of the business</li> </ul>
limited partnership	<ul style="list-style-type: none"> <li>• all general partners of the business</li> </ul>
corporation	<ul style="list-style-type: none"> <li>• all officers of the business</li> </ul>
limited liability company	<ul style="list-style-type: none"> <li>• each officer, manager, member as stipulated by your LLC articles</li> </ul>
joint venture	<ul style="list-style-type: none"> <li>• all venturers</li> </ul>
trust	<ul style="list-style-type: none"> <li>• all trustees of the trust</li> </ul>
city/county/university	<ul style="list-style-type: none"> <li>• all primary public official(s) of the city/county/university</li> </ul>

- Attach **Ownership Information Continued for Prequalification Packet Form L-OIC** if additional pages are needed.

## MEASUREMENT INFORMATION

This section requests information on the distance from your proposed location premises to:

- churches
- public hospitals
- private/public schools



Local ordinances may prohibit you from locating near one of these facilities.

- Check the box to indicate if your business is located **within 300 feet of a church or public hospital.**
- Check the box to indicate if your business is located within **300 feet of any private or public school.**
- Check the box to indicate if your business is located **within 1,000 feet of a private school.**
- Check the box to indicate if your business is located **within 1,000 feet of a public school.**

Measurement details are located with each question on the application.

## WARNING AND SIGNATURE

### WARNING

Texas Alcoholic Beverage Code, Section 101.69, states “. . . a person who makes a false statement or false representation in an application for a permit or license or other instrument to be filed with the Commission and required to be sworn commits an offense punishable by imprisonment in the penitentiary for not less than 2 nor more than 10 years.”

## SIGNATURE

The applicant *must sign the application*. Signatures must be original.

If the applicant is a (an):	then a (an):
individual	• individual owner must sign
partnership	• general partner must sign
limited partnership	• general partner must sign
corporation	• officer must sign
limited liability company	• manager or officer must sign
joint venture	• venturer must sign
trust	• trustee must sign
city/county/university	• primary public official must sign

Signatures and dates are not valid after 90 days of notary date.

All applications must be signed *before* a notary public.

## CERTIFICATE OF CITY SECRETARY (FOR P, Q, BF & BQ)

Your local TABC office will assist you in obtaining certifications from the city, county, and comptroller's offices by providing address and contact information.

With this certification, the city secretary acknowledges:

- the location is in the city limits,
- the location is in a wet area for the license/permit you are seeking, and
- a city charter or ordinance does not prohibit the sale of alcoholic beverages for the license/permit sought.

Certifications must not be more than 90 days old.

**If location cannot be certified** because it is in violation of city charter/ordinance, you may:

- cease the application process, no longer seeking license /permit OR
- continue to obtain your certifications understanding that you may request a hearing to be conducted by your county judge or Office of Administrative Hearing to challenge the certification prohibiting the issuance of your license/permit.

## **CERTIFICATE OF COUNTY CLERK (FOR P, Q, & BF)**

With this certification, the County Clerk acknowledges:

- the location is in a wet area for the license/permit you are seeking, and
- a Commissioner's Court order does not prohibit the sale of alcoholic beverages for the license/permit sought.

Certifications must not be more than 90 days old.

## **CERTIFICATE OF COUNTY CLERK (FOR BQ)**

With this certification, the County Clerk acknowledges:

- the location is in a wet area for the license/permit you are seeking,
- the permissible concentration of alcohol in wine (14% or 17%) sold or held by the applicant, and
- a Commissioner's Court order does not prohibit the sale of alcoholic beverages for the license/permit sought.

Certifications must not be more than 90 days old.

## **COMPTROLLER OF PUBLIC ACCOUNTS CERTIFICATE**

**The Comptroller of Public Accounts must** certify an applicant:

- holds a valid sales tax permit, and
- is not indebted to the State of Texas.

Certifications must not be more than 90 days old.

## **PUBLISHER'S AFFIDAVIT (FOR P & Q)**

Off-premise applicants for Package Store (P) and Wine Only Package Store (Q) permits *must* publish a notice of their application for a permit:

- in two consecutive issues of a qualified general circulation newspaper published in the city or town where the place of business is located.

### **Qualified Newspaper**

A qualified newspaper is:

- either a daily or weekly newspaper of general circulation published in the city or town where applicant's place of business is located.

If no newspaper is published within the city, then:

- use a newspaper published in the county.

If neither is available:

- use a newspaper published in the nearest adjacent county and circulated in the county of the applicant’s place of business.

Attach a clipping of this printed notice with the publisher’s affidavit.

The publication of your application for all beer licenses and wine and beer permits will be handled through your County Clerk’s office. Contact the County Clerk’s office for more information.

### Newspaper Notice

Your newspaper notice must:

- be printed in 10-point boldface type;
- state the type of permit to be applied for, including late hours permit(s);
- state the name of the owner or type of entity that will hold the license/permit;
- state the trade name
- state exact location including suite numbers and/or building numbers of the business for which the permit is sought
- state the names of each officer/partner of the business with respective titles.

**Note:** All information in your publication must match the information on your prequalification packet.

<b>If you are or will be operating as a (an):</b>	<b>then, include in the notice:</b>
individual	<ul style="list-style-type: none"> <li>• individual owner’s name</li> </ul>
partnership	<ul style="list-style-type: none"> <li>• name of all partners</li> </ul>
limited partnership	<ul style="list-style-type: none"> <li>• name of limited partnership</li> <li>• name of all general partners (if general partner is a corporation, name all officers)</li> </ul>
corporation	<ul style="list-style-type: none"> <li>• corporate name</li> <li>• name and title of all officers</li> </ul>
limited liability company	<ul style="list-style-type: none"> <li>• name of limited liability company</li> <li>• name and title of all officers and managers</li> </ul>
joint venture	<ul style="list-style-type: none"> <li>• name of all venturers</li> </ul>
trust	<ul style="list-style-type: none"> <li>• name of all trustees</li> </ul>
city/county/university	<ul style="list-style-type: none"> <li>• name of all primary public officials of the city/county/university</li> </ul>

*Example:*

LEGAL NOTICE

Application has been made with the Texas Alcoholic Beverage Commission for a [INSERT TYPE OF LICENSE/PERMIT] by [NAME OF APPLICANT] dba [TRADE NAME], to be located at [ADDRESS], [CITY], [COUNTY], Texas. Officers of said corporation [OR OWNERS OR PARTNERS] are [LIST NAME AND TITLE OF ALL APPLICABLE].

## **GUIDELINES FOR OWNERSHIP INFORMATION CONTINUED FOR PREQUALIFICATION PACKET (FORM L-OIC 4/2009)**

### **USE THIS FORM:**

- to list more than three individuals to be disclosed as required under the **Off-Premise Prequalification Packet** "Owner Information" section;
- to list all individuals as necessary for your type of entity.
- to include with your prequalification packet.

### **GENERAL INSTRUCTIONS:**

- **Type or print in black or blue ink.**
- **Enter "N/A" for questions that do not apply.**

### **LOCATION INFORMATION**

#### **TRADE NAME**

- Trade name should indicate the name of your business at this location.

#### **LOCATION ADDRESS**

- Enter the physical address of the location, including city, county, state and nine-digit ZIP Code.

## OWNER INFORMATION

Certain individual positions with the entity are required to be listed. Please refer to the chart below to determine which individuals with the business entity must be disclosed.

**Note:** These same individuals with titles will be in your publication. For further information, see the Publisher’s Affidavit section on page 19.

<b>If the applicant is a (an):</b>	<b>then list:</b>
individual	<ul style="list-style-type: none"> <li>the individual owner of the business</li> </ul>
partnership	<ul style="list-style-type: none"> <li>all partners of the business</li> </ul>
limited partnership	<ul style="list-style-type: none"> <li>all general partners of the business</li> </ul>
corporation	<ul style="list-style-type: none"> <li>all officers of the business</li> </ul>
limited liability company	<ul style="list-style-type: none"> <li>each officer, manager, member as stipulated by your LLC articles</li> </ul>
joint venture	<ul style="list-style-type: none"> <li>all venturers</li> </ul>
trust	<ul style="list-style-type: none"> <li>all trustees of the trust</li> </ul>
city/county/university	<ul style="list-style-type: none"> <li>all primary public official(s) of the city/county/university</li> </ul>

- Enter all the names of the individuals for your type of entity and their respective titles.



**GUIDELINES FOR  
ON-PREMISE LICENSE/PERMIT  
PREQUALIFICATION PACKET**



## **GUIDELINES FOR ON-PREMISE LICENSE/PERMIT PREQUALIFICATION PACKET (FORM L-ON 5/2009)**

### **GENERAL INSTRUCTIONS:**

- Type or print in black or blue ink.
- Enter “N/A” for questions that do not apply.

### **60-DAY SIGN FOR ON-PREMISE LICENSE/PERMIT**

- You may be required to **post a 60-day sign at your location address.**
- **If the location has not been previously licensed** for on-premises consumption of alcoholic beverages 24 months before the initial application review by your local TABC office:
  - you must prominently post an outdoor sign at the location for 60 days prior to the receipt of your application at TABC headquarters;
  - this sign gives public notice of your intent to seek a license/permit;
  - failure to display this sign could result in the delay in the issuance of your license/permit.
- **Other sign requirements may be required** for your location.
- Contact your local TABC office to obtain signs that are necessary.

### **LOCATION INFORMATION**

#### **TYPE OF ON-PREMISE LICENSE/PERMIT**

- Check the box to indicate which license/permit for which you are applying. For more information on “License and Permit Descriptions” see Exhibit II.

**NOTE:** Before beginning your application process, we suggest you check with your city/county to ensure your location is wet for the license/permit you are seeking.

#### **INDICATE PRIMARY BUSINESS AT THIS LOCATION**

- Check the appropriate box for the primary business activity at this location. If you check the “Miscellaneous” box, you must enter a business type.

#### **TRADE NAME**

- Trade name should indicate the name of your business at this location.

## LOCATION ADDRESS

- Enter the physical address of the location, including city, county, state and nine-digit ZIP Code.

## MAILING ADDRESS, PHONE NUMBERS AND E-MAIL ADDRESS

- Enter mailing address, including city, state and nine-digit ZIP Code.
  - Your mailing address **may not** be the address of a licensing or bookkeeping service.
- Enter the primary business phone number, including area code.
- Enter an alternate phone number, including area code. The alternate number may be a second business, home, or cell phone number but **may not** be a licensing or bookkeeping service phone number.
- Enter your current e-mail address.
- **If your mailing address, phone numbers or e-mail address change(s)** after you submit your application, send written notice TABC Headquarters in Austin. It is imperative that you keep this information current, as this will be the information used for all correspondence on your license/permit application.

## OWNER INFORMATION

### TYPE OF OWNER

- Check the box to indicate your type of ownership. Owner refers to the type of entity that will hold the license/permit.
  - If you check the box labeled “Other,” describe the type of owner for the business.

### OWNER OF ENTITY/APPLICANT

- For, “Owner of Entity/Applicant,” enter the name of the owner of the business or the name of the applicant for the business. If the entity is registered with the Secretary of State, use the same name.
- Certain individual positions with the entity are required to be listed. See chart below to determine what individual with the business entity must be disclosed.

**Note:** These same individuals with titles will be in your publication. For further information, see the Publisher’s Affidavit section on page 19.

If the applicant is a (an):	then list:
individual	<ul style="list-style-type: none"> <li>the individual owner of the business</li> </ul>
partnership	<ul style="list-style-type: none"> <li>all partners of the business</li> </ul>
limited partnership	<ul style="list-style-type: none"> <li>all general partners of the business</li> </ul>
corporation	<ul style="list-style-type: none"> <li>all officers of the business</li> </ul>
limited liability company	<ul style="list-style-type: none"> <li>each officer, manager, member as stipulated by your LLC articles</li> </ul>
joint venture	<ul style="list-style-type: none"> <li>all venturers</li> </ul>
trust	<ul style="list-style-type: none"> <li>all trustees of the trust</li> </ul>
city/county/university	<ul style="list-style-type: none"> <li>all primary public official(s) of the city/county/university</li> </ul>

- Attach **Ownership Information Continued for Prequalification Packet Form L-OIC** if additional pages are needed.

## MEASUREMENT INFORMATION

This section requests information on the distance from your proposed location premises to:



- churches
- public hospitals
- private/public schools
- day care centers
- day care facilities

Local ordinances may prohibit you from locating near one of these facilities. The Alcoholic Beverage Code, Chapter 109, Subchapter C, includes notification requirements. Measurement details are located with each question on the application.

- Check the box to indicate if your business is located **within 300 feet of a church or public hospital.**
- Check the box to indicate if your business is located **within 300 feet of any private/public school, day care center or child care facility.**
- Check the box to indicate if your business is located **within 1,000 feet of a private school.**
- Check the box to indicate if your business is located **within 1,000 feet of a public school.**

## WARNING AND SIGNATURE

### WARNING

Texas Alcoholic Beverage Code, Section 101.69, states “. . . a person who makes a false statement or false representation in an application for a permit or license or other instrument to be filed with the Commission and required to be sworn commits an offense punishable by imprisonment in the penitentiary for not less than 2 nor more than 10 years.”

### SIGNATURE

**The applicant *must* sign the application.** Signatures must be original.

<b>If the applicant is a (an):</b>	<b>then a (an):</b>
individual	• individual owner must sign
partnership	• general partner must sign
limited partnership	• general partner must sign
corporation	• officer must sign
limited liability company	• manager or officer must sign
joint venture	• venturer must sign
trust	• trustee must sign
city/county/university	• primary public official must sign

Signatures and dates are not valid after 90 days of notary date.

All applications must be signed *before* a notary public.

## CERTIFICATE OF CITY SECRETARY (FOR MB, RM, BE, BG, V & Y)

Any local TABC office will assist you in obtaining certifications from the city, county, and comptroller’s offices by providing address and contact information.

With this certification, the city secretary acknowledges:

- the location is in the city limits,
- the location is in a wet area for the license/permit you are seeking, and
- a city charter or ordinance does not prohibit the sale of alcoholic beverages for the license/permit sought.

Certifications must not be more than 90 days old.

If **location cannot be certified** because it is in violation of city charter/ordinance, you may:

- cease the application process, no longer seeking license/permit OR
- continue to obtain your certifications understanding that you may request a hearing to be conducted by your county judge or office of administrative hearing to challenge the certification prohibiting the issuance of your license/permit.

## **CERTIFICATE OF CITY SECRETARY FOR LATE HOURS LICENSE/PERMIT**

With this certification, the city secretary acknowledges:

- the location is in the city limits,
- a city charter or ordinance does not prohibit the sale of **mixed beverages** between midnight and 2 A.M. for the license/permit sought,
- a city charter or ordinance does not prohibit the sale of **beer** between midnight and any time up to 2 A.M. for the license/permit sought, and
- whether the location is in a city with a population of 500,000 or more (according to the last Federal Census).

Certifications must not be more than 90 days old.

## **CERTIFICATE OF COUNTY CLERK (FOR MB, RM & BE)**

With this certification, the County Clerk acknowledges:

- the location is in a wet area for the licenses/permit you are seeking, and
- a Commissioner's Court order does not prohibit the sale of alcoholic beverages for the license/permit sought.

Certifications must not be more than 90 days old.

## **CERTIFICATE OF COUNTY CLERK (FOR BG, V & Y)**

With this certification, the County Clerk acknowledges:

- the location is in a wet area for the license/permit you are seeking,
- the permissible concentration of alcohol in wine (14% or 17%) sold or held by the applicant, and
- a Commissioner's Court order does not prohibit the sale of alcoholic beverages for the license/permit sought.

Certifications must not be more than 90 days old.

## **CERTIFICATE OF COUNTY CLERK FOR LATE HOURS LICENSE/PERMIT**

With this certification, the County Clerk acknowledges:

- a Commissioner's Court order does not prohibit the sale of **mixed beverages** between midnight and 2 A.M. for the license/permit sought,
- a Commissioner's Court order does not prohibit the sale of **beer** between midnight and any time up to 2 A.M. for the license/permit sought, and
- whether the location is in a county with a population of 500,000 or more (according to the last Federal Census).

Certifications must not be more than 90 days old.

## **COMPTROLLER OF PUBLIC ACCOUNTS CERTIFICATE**

**The Comptroller of Public Accounts must** certify an applicant:

- holds a valid sales tax permit
- is not indebted to the State of Texas

Certifications must not be more than 90 days old.

## **PUBLISHER'S AFFIDAVIT (FOR MB, LB, RM & BP)**

On-premise applicants for Mixed Beverage (MB), Mixed Beverage Late Hours (LB), Mixed Beverage with Food and Beverage Certificate (RM), and Brewpub (BP) licenses/permits *must* publish a notice of their application for a permit:

- in two consecutive issues of a qualified general circulation newspaper published in the city or town where the place of business is located.

### **Qualified Newspaper**

A qualified newspaper is:

- either a daily or weekly newspaper of general circulation published in the city or town where applicant's place of business is located.

If no newspaper is published within the city, then:

- use a newspaper published in the county.

If neither is available:

- use a newspaper published in the nearest adjacent county and circulated in the county of the applicant's place of business.

Attach a clipping of this printed notice with the publisher's affidavit.

The publication of your application for all beer licenses and wine and beer permits will be handled through your County Clerk’s office. Contact the County Clerk’s office for more information.

**Note:** All information in the published legal notice must match the information on your application.

**Newspaper Notice**

Your newspaper notice must:

- be printed in 10-point boldface type
- state the type of permit to be applied for, including late hours permit(s);
- state the name of the owner or type of entity that will hold the license/permit;
- state the trade name
- state exact location including suite numbers and/or building numbers of the business for which the permit is sought
- state the names of each officer/partner of the business with respective titles.

**Note:** All information in your publication must match the information on your prequalification packet.

<b>If you are or will be operating as a (an):</b>	<b>then, include in the notice:</b>
individual	<ul style="list-style-type: none"> <li>• individual owner’s name</li> </ul>
partnership	<ul style="list-style-type: none"> <li>• name of all partners</li> </ul>
limited partnership	<ul style="list-style-type: none"> <li>• name of limited partnership</li> <li>• name of all general partners (if general partner is a corporation, name all officers)</li> </ul>
corporation	<ul style="list-style-type: none"> <li>• corporate name</li> <li>• name and title of all officers</li> </ul>
limited liability company	<ul style="list-style-type: none"> <li>• name of limited liability company</li> <li>• name and title of all officers and managers</li> </ul>
joint venture	<ul style="list-style-type: none"> <li>• name of all venturers</li> </ul>
trust	<ul style="list-style-type: none"> <li>• name of all trustees</li> </ul>
city/county/university	<ul style="list-style-type: none"> <li>• name of all primary public officials of the city/county/university</li> </ul>



*Example:*

LEGAL NOTICE

Application has been made with the Texas Alcoholic Beverage Commission for a [INSERT TYPE OF LICENSE/PERMIT] by [NAME OF APPLICANT] dba [TRADE NAME], to be located at [ADDRESS], [CITY], [COUNTY], Texas. Officers of said corporation [OR OWNERS OR PARTNERS] are [LIST NAME AND TITLE OF ALL APPLICABLE].

## **GUIDELINES FOR OWNERSHIP INFORMATION CONTINUED FOR PREQUALIFICATION PACKET (FORM L-OIC 4/2009)**

### **USE THIS FORM**

- to list more than three individuals to be disclosed as required under the **On-Premise Prequalification Packet** “Owner Information” section;
- to list all individuals as necessary for your type of entity.
- to include with your prequalification packet.

### **GENERAL INSTRUCTIONS:**

- **Type or print in black or blue ink.**
- **Enter “N/A” for questions that do not apply.**

### **LOCATION INFORMATION**

#### **TRADE NAME**

- Trade name should indicate the name of your business at this location.

#### **LOCATION ADDRESS**

- Enter the physical address of the location, including city, county, state and nine-digit ZIP Code.

## OWNER INFORMATION

Certain individual positions with the entity are required to be listed. Please refer to the chart below to determine which individuals with the business entity must be disclosed.

**Note:** These same individuals with titles will be in your publication. For further information, see the Publisher’s Affidavit section on page 19.

<b>If the applicant is a (an):</b>	<b>then list:</b>
individual	<ul style="list-style-type: none"> <li>• the individual owner of the business</li> </ul>
partnership	<ul style="list-style-type: none"> <li>• all partners of the business</li> </ul>
limited partnership	<ul style="list-style-type: none"> <li>• all general partners of the business</li> </ul>
corporation	<ul style="list-style-type: none"> <li>• all officers of the business</li> </ul>
limited liability company	<ul style="list-style-type: none"> <li>• each officer, manager, member as stipulated by your LLC articles</li> </ul>
joint venture	<ul style="list-style-type: none"> <li>• all venturers</li> </ul>
trust	<ul style="list-style-type: none"> <li>• all trustees of the trust</li> </ul>
city/county/university	<ul style="list-style-type: none"> <li>• all primary public official(s) of the city/county/university</li> </ul>

- Enter all the names of the individuals for your type of entity and their respective titles.

# GUIDELINES FOR LOCATION PACKET FOR RETAILERS



## **GUIDELINES FOR LOCATION PACKET FOR RETAILERS (FORM L-L 1/2009)**

### **GENERAL INSTRUCTIONS:**

- Type or print in black or blue ink.
- Enter “N/A” for questions that do not apply.

### **LOCATION INFORMATION**

#### **TRADE NAME**

- Trade name should indicate the name of your business at this location.

#### **LOCATION ADDRESS**

- Enter the physical address of the location, including city, county, state and nine-digit ZIP Code.

#### **BUSINESS ENTITY/APPLICANT NAME**

- For “Business Entity Name/Applicant,” enter the name of the owner of the business or the name of the applicant for the business.
  - If the entity is registered with the Secretary of State, use the same name.
  - This should match your prequalification packet.

#### **FEDERAL EMPLOYER IDENTIFICATION NO.**

- Enter the Federal Employer Identification No. (FEIN) that was assigned to you by the IRS.
  - If you are a sole owner, enter your Social Security number.

### **INITIAL INFORMATION**

This section requests information on current or active licenses/permits with TABC. This will determine necessary information to be given to the TABC office.

- Check the box to indicate if you have a **current and active** TABC license/permit with the FEIN entered above.
  - If “Yes,” enter the license/permit number of the last license/permit issued (the license/permit number will have six digits).
  - If “No,” you must also complete the **Business Packet Form L-B** (see page 41).

If you hold a current license/permit:

- Check the box to indicate if there has been any change in ownership.
  - If “Yes,” you must complete the **Business Packet for Reporting Changes Form L-BRC** (packet available at [www.tabc.state.tx.us](http://www.tabc.state.tx.us)).

## OWNERSHIP/LEASE/SUBLEASE/MANAGEMENT INFORMATION

This section requests information on the property ownership of the location, and any agreements involved in operating the location, including lease, sublease, concession, franchise, management and service agreements. It also requests information on whether the location shares the premises with other businesses.

- Check the box to indicate if you own the land and building at the proposed licensed location.
  - If “No,” then:
    - complete **Owner of Property Form L-OP**, and
    - attach a copy of the lease.
- If you have a lease for this location, enter:
  - expiration date,
  - monthly rental amount, and
  - other fees and payments to the landlord.
- Check the box to indicate if you are 1) operating under a concession agreement, service agreement or management agreement that contain terms for services or management beyond property rental, 2) operating under a sublease. A concession, service or management agreement is any agreement relating to any phase of the sale or service of alcoholic beverages.
  - If “Yes,” then:
    - complete **Sublessor Form L-SL**,
    - enter expiration date,
    - enter monthly fee, and
    - attach a copy of the agreement(s).
  - If the sublessor differs from the concession, service, or management company, then:
    - complete **Sublessor Form L-SL** for each, and
    - enter the name of the concession, service or management company in the sublessor name.
- Check the box to indicate if you have additional agreements, excluding the one above, that require the applicant to pay in a dollar figure or percentage of gross or net income of the business.

- If "Yes," then:
  - attach a copy of the agreement
- Check the box to indicate if you share the premises with another business entity.
  - If "Yes," then enter:
    - trade name(s) of the business(es)
    - corresponding sales and use tax number(s)
- Check the box to indicate if you or anyone else is operating under a franchise agreement.
  - If "Yes," then:
    - You **MUST** have exclusive control of all phases of the purchase, sale, and service of alcoholic beverages (TABC Code 109, Subchapter D).

## **SALES AND LOCATION INFORMATION**

Sales data is required to determine appropriate signage for your location as well as determining your qualifications to hold a Food and Beverage Certificate. In addition, a diagram of the location may be requested for the proposed licensed premises.

### **SALES**

- Enter the following sales data for either the last year of operation or for the projected annual sales:
  - alcoholic beverage sales amount,
  - food sales amount,
  - other sales amount, and
  - total sales amount.

### **LOCATION**

- Check the box to indicate if the proposed location is in a hotel or motel.
- Check the box to indicate if the license/permit will embrace the building and grounds at the address shown.
  - If "No," then:
    - Submit a diagram showing/labeling:
      - the portion of the parts of the location that the license/permit will cover,
      - all entrances, and
      - the type of business(es) operating in the adjoining premises.
    - Your local TABC office will assist you with this form at the time of inspection.

## FINANCE INFORMATION

This section requires financial details of your business location.

- Enter the amount of total investment from all sources for this location.
  - Be prepared to provide copies of all financial documents.

Points to keep in mind as you complete the finance information:

<b>If funds are received from a(an):</b>	<b>then:</b>
individual	<ul style="list-style-type: none"> <li>• list the name, Social Security number (SSN), driver's license number, date of birth, loan amount, and loan terms.</li> </ul>
corporation	<ul style="list-style-type: none"> <li>• list the corporation name, Federal Employer Identification Number (FEIN), loan amount, loan terms, and</li> <li>• list each of the officers of the corporation for this loan, including name, SSN, driver's license number, and date of birth.</li> </ul>
partnership	<ul style="list-style-type: none"> <li>• list the partnership, FEIN, loan amount, loan terms, and</li> <li>• list each of the partners for this loan, including name, SSN, driver's license number, and date of birth.</li> </ul>
bank or lending institution	<ul style="list-style-type: none"> <li>• enter the lender name, loan amount, and loan terms</li> </ul>
small business association	<ul style="list-style-type: none"> <li>• enter the lender name, loan amount, and loan terms.</li> </ul>

You will be required to submit a copy of your loan agreement as well as other possible supporting documents concerning your relationship with funders, and the source and location of each fund.



## MEASUREMENT INFORMATION

This section requests information on the distance from your proposed location premises or property line to:



- churches
  - private/public schools
  - residence
  - day care or social service facility
  - established neighborhood association
- Check the box to indicate if your business is located **within 1,000 feet of a private/public school** when measuring from the door where the public enters your establishment to the nearest property line of a private/public school.
    - If “Yes,”
      - give written notice of this application to school officials, and
      - attach a copy of the notice to this application
  - Check the box to indicate if your business is located **within 300 feet of a residential address and established neighborhood association.**
    - If “Yes,” and you are applying for an On-Premise License/Permit and if a Food and Beverage Certificate is not applied for, then:
      - **you must notify** each residential address and established neighborhood association in writing,
        - see Notice of Application Form Exhibit III;
      - attach a list of all addresses notified with a copy of the completed notice.

## MEASUREMENT INFORMATION FOR ON-PREMISE LICENSE/PERMIT ONLY (municipalities with a population of 1,500,000 or more)

This section requests information for applicants in municipalities with a population of 1,500,000 or more according to the last Federal Census.

- Check the box to indicate if your business is located **within 300 feet of a residence, church, school, day care or social service facility** when measuring in a straight line from the nearest point of the property line of the proposed location to the nearest point of the property line of any of these facilities.
  - If “Yes,”
    - indicate if 75% or more of the applicant’s actual or anticipated gross revenue is from the sale of alcoholic beverages.
  - If answers to both questions is “Yes,”
    - indicate if you have notified all tenants or property owners within five days of filing the original application that you have filed an application.

## WARNING AND SIGNATURE

### WARNING

Each licensee or permittee shall have exclusive occupancy and control of the entire licensed location with respect to sale of alcoholic beverages. Any arrangement that surrenders such control of the employees, premises or business, including profits and losses, to person other than the licensee or permittee is unlawful.

Texas Alcoholic Beverage Code, Section 101.69, states “. . . a person who makes a false statement or false representation in an application for a permit or license or other instrument to be filed with the Commission and required to be sworn commits an offense punishable by imprisonment in the penitentiary for not less than 2 nor more than 10 years.”

### SIGNATURE

**The applicant *must* sign the application.** Signatures must be original.

<b>If the applicant is a (an):</b>	<b>then a (an):</b>
individual	• individual owner must sign
partnership	• general partner must sign
limited partnership	• general partner must sign
corporation	• officer must sign
limited liability company	• manager or officer must sign
joint venture	• venturer must sign
trust	• trustee must sign
city/county/university	• primary public official must sign

Signatures and dates are not valid after 90 days of notary date.

All applications must be signed *before* a notary public.

# GUIDELINES FOR OWNER OF PROPERTY FORM



## **GUIDELINES FOR OWNER OF PROPERTY FORM (L-OP 1/2009)**

### **USE THIS FORM:**

- to list information about the owner(s) of the land, building or boat.
- if the land and the building are owned by different owners or entities,
  - complete a separate **Owner of Property Form L-OP** for each owner or entity

### **GENERAL INSTRUCTIONS:**

- **Type or print in black or blue ink.**
- **Enter “N/A” for questions that do not apply.**

### **TRADE NAME**

- Trade name should indicate the name of your business at this location.

### **TYPE OF PROPERTY OWNED**

- Check the box to indicate if the owner for the proposed location premises is:
  - owner of land and building
  - owner of land
  - owner of building, or
  - owner of boat.

### **BUSINESS ENTITY NAME FOR OWNER OF PROPERTY**

- Enter the property owner’s name. If the entity is registered with the Secretary of State, use the same name. If you are a sole owner proceed to the next section.

### **FEDERAL EMPLOYER IDENTIFICATION NO.**

- Enter the property owner’s Federal Employer Identification No. (FEIN) that was assigned by the IRS. If you are a sole owner, proceed to the next section.

## **OWNER PERSONAL INFORMATION**

- Enter the name(s) of the owner(s) of the property or boat, and their personal information, including:
  - Social Security number,
  - driver's license number (first enter the two-letter abbreviation for the issuing state),
  - date of birth
  - title/owner.
  
- Provide information for:
  - owner,
  - officers/managers (for corporation/limited liability company owner), and
  - general partner (for limited or limited liability partnership owners) with all officers.

**GUIDELINES FOR  
SUBLESSOR FORM**



## **GUIDELINES FOR *SUBLESSOR FORM* (L-SL 1/2009)**

### **USE THIS FORM:**

- to provide information about the sublessor(s) of the proposed location premises
- if you have an agreement with a management company or concessionaire, and this company or concessionaire differs from the lessor or sublessor
- to provide name, address, and other required information of the management company officers

Attach a copy of all management and concession agreements to your application.

### **GENERAL INSTRUCTIONS:**

- **Type or print in black or blue ink.**
- **Enter “N/A” for questions that do not apply.**

### **TRADE NAME**

- Trade name should indicate the name of your business at this location.

### **TYPE OF AGREEMENT**

- Check the box to indicate which type of agreement you are operating under:
  - sublessor, or
  - concessionaire, or
  - management company of permittee.

### **BUSINESS ENTITY NAME FOR SUBLESSOR – CONCESSIONAIRE – MANAGEMENT COMPANY**

- Enter the name of the sublessor/concessionaire/management company. If the entity is registered with the Secretary of State, use the same name. If you are a sole owner, proceed to the next section.

### **FEDERAL EMPLOYER IDENTIFICATION NO.**

- Enter the sublessor/concessionaire/management company’s Federal Employer Identification No. (FEIN) assigned by the IRS. If you are a sole owner, proceed to the next section.

## **SUBLESSOR PERSONAL INFORMATION**

- Enter the name(s) of the sublessor(s)/concessionaire(s)/management company and their personal information, including:
  - Social Security number,
  - driver's license number (first enter the two-letter abbreviation for the issuing state),
  - date of birth, and
  - title/owner.
  
- Provide information for:
  - owner,
  - officers/managers (for corporation/limited liability company owner), and
  - general partner (for limited or limited liability partnership owners) with all officers.



## GUIDELINES FOR LOCAL CARTAGE PERMIT



## **GUIDELINES FOR LOCAL CARTAGE PERMIT FORM (L-E 1/2009)**

### **USE THIS FORM:**

- if you are applying for a Local Cartage Permit (E) or Local Cartage Transfer Permit (ET);
- to list vehicles used in connection with the permit.



### **GENERAL INSTRUCTIONS:**

- **Type or print in black or blue ink.**
- **Enter “N/A” for questions that do not apply.**

### **ENTITY/APPLICANT**

- Check the box to indicate if the applicant is a:
  - Package Store/Wine-Only Package Store, or
  - Warehouse/Transfer Company.
- If you are a warehouse or transfer company, then:
  - describe the nature of your business.



### **LIST OF VEHICLES**

- Enter the vehicles owned or leased by the applicant that will be used in connection with the permit, including:
  - make,
  - model,
  - year, and
  - license number.

If you need more space, use additional copies of **Local Cartage Permit Form L-E**.

# GUIDELINES FOR BUSINESS PACKET



## **GUIDELINES FOR *BUSINESS PACKET* (FORM L-B 1/2009)**

### **The Business Packet Form L-B:**

- should be completed by a new applicant/entity that does not currently hold an active license/permit issued by TABC under the same Federal Employer Identification No. (FEIN);
- consists of **Business Packet Form L-B**, all entity pages (**Form L-C, L-LLC, L-P**) and all **Personal History Sheets (Form L-40.2)**.

**Note:** In order to report the appropriate levels of ownership, refer to Business Structure Chart in Exhibit IV. This will also determine who will need to submit a personal history sheet.

### **GENERAL INSTRUCTIONS:**

- **Type or print in black or blue ink.**
- **Enter “N/A” for questions that do not apply.**

## **OWNER INFORMATION**

### **TYPE OF OWNER**

- Check the box to indicate your type of ownership. Owner refers to the type of entity that will hold the license/permit.
  - If you check the box labeled “Other,” describe the type of owner for the business, i.e. trade associations, etc.

### **OWNER OF BUSINESS/APPLICANT**

- Enter the name of the owner of the business or the name of the applicant for the business.
  - If the entity is registered with the Secretary of State, use the same name.
  - This should match your prequalification packet.

### **FEDERAL EMPLOYER IDENTIFICATION NO.**

- Enter the Federal Employer Identification No. (FEIN) that was assigned to you by the IRS.
  - If you are a sole owner, enter your Social Security number.

## BUSINESS INFORMATION

- Check the box to indicate if any person listed in this Business Packet, including his or her spouse, has been finally convicted or received deferred adjudication for any of the offenses listed.
  - If “Yes,” then:
    - indicate the type of offense, and
    - attach an explanation.
  
- Check the box to indicate if it has been five years since the termination of a sentence, parole, or probation has been served for any of the offenses indicated above.
  - If “No,” then:
    - attach an explanation.
  
- Check the box to indicate if you or anyone listed in the Business Packet has had a cancellation of a license/permit in the past five years.
  - If “Yes,” then:
    - attach an explanation.
  
- Prohibited Interests
  - An applicant or license/permit holder may have an interest, directly or indirectly, **in only one level** of the alcoholic beverage industry, i.e., manufacturing, wholesaling or retailing (see TABC code, section 102).
  - You or your agent, servant or employee:
    - may not be employed in any capacity at different levels,
    - may not rent or lease property or equipment from or to an entity operating at another level
    - may not secure credit or a loan in any form for an entity at another level,
    - cannot control, in any fashion, the interests of a licensee/permittee at a different level.
  
- Check the box to indicate if anyone listed in the Business Packet is in violation of the above requirements.
  - If “Yes,” then:
    - attach an explanation.

## WARNING AND SIGNATURE

### WARNING

Each licensee or permittee shall have exclusive occupancy and control of the entire licensed location with respect to sale of alcoholic beverages. Any arrangement that surrenders such control of the employees, premises or business, including profits and losses, to person other than the licensee or permittee is unlawful.

Texas Alcoholic Beverage Code, Section 101.69, states “. . . a person who makes a false statement or false representation in an application for a permit or license or other instrument to be filed with the Commission and required to be sworn commits an offense punishable by imprisonment in the penitentiary for not less than 2 nor more than 10 years.”

### SIGNATURE

**The applicant *must* sign the application.** Signatures must be original.

<b>If the applicant is a (an):</b>	<b>then a (an):</b>
individual	• individual owner must sign
partnership	• general partner must sign
limited partnership	• general partner must sign
corporation	• officer must sign
limited liability company	• manager or officer must sign
joint venture	• venturer must sign
trust	• trustee must sign
city/county/university	• primary public official must sign

Signatures and dates are not valid after 90 days of notary date.

All applications must be signed *before* a notary public.

**GUIDELINES FOR  
BUSINESS ENTITY FORMS  
L-C (CORPORATION)**



## **GUIDELINES FOR CORPORATE BUSINESS ENTITIES (FORM L-C)**

### **GENERAL INSTRUCTIONS:**

- Type or print in black or blue ink.
- Enter “N/A” for questions that do not apply.

**READ THE CORPORATION INFORMATION (IN SHADED BOX) CLOSELY AND REFER TO THE ATTACHED FORM IN ORDER TO PROVIDE THE MINIMUM REQUIREMENTS NEEDED.**

### **ENTITY INFORMATION**

#### **FEDERAL EMPLOYER IDENTIFICATION NO.**

- Enter the Federal Employer Identification No. (FEIN) that was assigned to you by the IRS.

#### **BUSINESS ENTITY NAME**

- Enter the name of the owner of the business or the name of the applicant for the business.
  - If the entity is registered with the Secretary of State, use the same name.
  - This should match your prequalification packet.

#### **CHARTER NO.**

- Enter the charter number that was given to your corporation by the Secretary of State.

#### **DATE APPROVED**

- Enter in the date that the Secretary of State approved your application.

#### **STATE**

- Enter the state in which this corporation is registered.

#### **CLASS AND NUMBER OF SHARES ISSUED**

- Enter in the class and number of shares that are currently issued by your company.
  - The class and number of shares issued **must match the class and number of shares** held by each person listed.



## CORPORATE OWNERSHIP INFORMATION

- Check the box to indicate if corporate owner is an:
  - officer
  - director
  - stockholder
  - trustee/beneficiary.
  
- Enter in all personal information as requested for each officer, director, stockholder and trustee/beneficiary:
  - Social Security number,
  - driver's license number (first enter the two-letter abbreviation for the issuing state),
  - date of birth,
  - class and number of shares,
  - full legal name (last name, first name, middle initial), and
  - title.

If you need more space, use additional copies of **Corporation Form L-C**.

**GUIDELINES FOR  
BUSINESS ENTITY FORMS  
L-LLC (LIMITED LIABILITY COMPANY)**



## **GUIDELINES FOR LIMITED LIABILITY COMPANIES (FORM L-LLC)**

### **GENERAL INSTRUCTIONS:**

- Type or print in black or blue ink.
- Enter “N/A” for questions that do not apply.

**READ THE LIMITED LIABILITY COMPANY INFORMATION (IN SHADED BOX) CLOSELY AND REFER TO THE ATTACHED FORM IN ORDER TO PROVIDE THE MINIMUM REQUIREMENTS NEEDED.**

### **ENTITY INFORMATION**

#### **FEDERAL EMPLOYER IDENTIFICATION NO.**

- Enter the Federal Employer Identification No. (FEIN) that was assigned to you by the IRS.

#### **BUSINESS ENTITY NAME**

- Enter the name of the owner of the business or the name of the applicant for the business.
  - If the entity is registered with the Secretary of State, use the same name.
  - This should match your prequalification packet.

#### **CHARTER NO.**

- Enter the charter number that was given to your limited liability company by the Secretary of State.

#### **DATE APPROVED**

- Enter in the date that the Secretary of State approved your application.

#### **STATE**

- Enter the state in which this limited liability company is registered.

#### **CLASS AND NUMBER OF SHARES ISSUED**

- Enter the class and number of memberships or units that are currently issued by your company.
  - The class and number of memberships or units issued **must match the memberships or units** held by each person listed.

## LIMITED LIABILITY COMPANY OWNERSHIP INFORMATION

- Check the box to indicate if limited liability owner is a(an):
  - officer,
  - manager,
  - member.
  
- Enter all personal information as requested for each officer, manager, and member:
  - Social Security number,
  - driver's license number (first enter the two-letter abbreviation for the issuing state),
  - date of birth,
  - percent membership or units held,
  - full legal name (last name, first name, middle initial), and
  - title.

If you need more space, use additional copies of **Limited Liability Company Form L-LLC**.

**GUIDELINES FOR  
BUSINESS ENTITY FORMS  
L-P (PARTNERSHIP)**



## **GUIDELINES FOR PARTNERSHIPS (FORM L-P)**

### **GENERAL INSTRUCTIONS:**

- Type or print in black or blue ink.
- Enter “N/A” for questions that do not apply.

**READ THE PARTNERSHIP INFORMATION (IN SHADED BOX) CLOSELY AND REFER TO THE ATTACHED FORM IN ORDER TO PROVIDE THE MINIMUM REQUIREMENTS NEEDED.**

### **ENTITY INFORMATION**

#### **FEDERAL EMPLOYER IDENTIFICATION NO.**

- Enter the Federal Employer Identification No. (FEIN) that was assigned to you by the IRS.

#### **BUSINESS ENTITY NAME**

- Enter the name of the owner of the business or the name of the applicant for the business.
  - If the entity is registered with the Secretary of State, use the same name.
  - This should match your prequalification packet.

#### **CHARTER NO.**

- Enter the charter number that was given to your partnership by the Secretary of State.

#### **DATE APPROVED**

- Enter in the date that the Secretary of State approved your application.

#### **STATE**

- Enter the state in which this partnership is registered.

## **PARTNERSHIP INFORMATION**

- Check the box to indicate if partnership owner is a:
  - general partner,
  - limited partner.
  
- Enter in all personal information as requested for each general partner and limited partner:
  - Social Security number,
  - driver's license number (first enter the two-letter abbreviation for the issuing state),
  - date of birth,
  - percent of interest,
  - full legal name (last name, first name, middle initial), and
  - title.

If you need more space, use additional copies of **Partnership Form L-P**.

**GUIDELINES FOR  
BUSINESS ENTITY FORMS  
L-40.2 (PERSONAL HISTORY SHEET)**





## **GUIDELINES FOR PERSONAL HISTORY SHEET (FORM L-40.2)**

### **GENERAL INSTRUCTIONS:**

- Type or print in black or blue ink.
- Enter “N/A” for questions that do not apply.

### **APPLICANT INFORMATION**

#### **TRADE NAME**

- Trade name should indicate the name of your business at this location.

#### **LOCATION ADDRESS**

- Enter the physical address of the location, including city, state and nine-digit ZIP Code.

#### **APPLICANT’S MARITAL STATUS**

- Check the box to indicate your marital status.

#### **APPLICANT’S PERSONAL INFORMATION**

- Enter the applicant’s personal information, including:
  - Social Security number,
  - driver’s license number (first enter the two-letter abbreviation for the issuing state),
  - date of birth,
  - full legal name
  - place of birth, including city, state, country
  - race and sex,
  - height and weight, and
  - hair color and eye color.

## APPLICANT'S SPOUSE INFORMATION

- Enter the spouse's personal information, including:
  - Social Security number,
  - driver's license number (first enter the two-letter abbreviation for the issuing state),
  - date of birth,
  - full legal name
  - place of birth, including city, state, country
  - race and sex,
  - height and weight, and
  - hair color and eye color.

## MINOR AS RESIDENT INFORMATION

- Check the box to indicate if anyone over the age of 18, other than your spouse is residing in the same household with you.
  - If "Yes," then:
    - complete personal information for each resident.
- Enter the resident's personal information, including:
  - Social Security number,
  - driver's license number (first enter the two-letter abbreviation for the issuing state),
  - date of birth,
  - the resident's relationship to you,
  - full legal name, and
  - race and sex.

If you need to list more residents, please attach an additional page.

## RESIDENTIAL ADDRESSES INFORMATION

If you have not lived in Texas for the previous 12 months, you are required to provide TABC with a certified copy of your criminal background check from the state police of any state where you lived in the previous five years.

- Enter your residential addresses for the past five (5) years.
  - Begin with your current address, and for each residence enter:
    - number and street,
    - city, state, ZIP Code, and
    - dates for "From" and "To" time period.
  - If you need to list more addresses, please attach an additional page.

- Enter the area code and phone number for your:
  - business,
  - residence
  - mobile phone

## **RESIDENT STATUS INFORMATION**

- Check the box to indicate if you are a current United States citizen:
  - If “Yes,” then check the box to indicate:
    - native born, or
    - naturalized.
      - If naturalized, then:
        - enter the “A” number from your Certificate of Naturalization.
  - If “No,” then:
    - explain your legal status in the United States and attach an additional page if you need more space.
    - provide front and back copies of all documents, i.e., Visa, Resident Alien, Employment Authorization documents, etc. and attach an additional page if needed.

## **EMPLOYMENT HISTORY INFORMATION**

- Enter your employment for the past five (5) years.
  - Begin with your current employer and for each employer, enter:
    - name of employer,
    - physical address, city, state, ZIP Code,
    - position held, and
    - dates for “From” and “To” time period.
  - Indicate periods of unemployment or retirement, including dates.
    - If retired, include:
      - name of the company from which you retired, and
      - the position you held.
  - If you need to list more employment, please attach an additional page.

## INDIVIDUAL FINANCIAL INFORMATION

- Enter all your personal investments for this location\* (i.e., notes, loans, gifts, cash, services or equipment and operating capital), including:
  - each individual amount invested, and
  - original source of investment (loans, previous employment, etc.)
  - total dollar amount of personal investment.
- Attach financial documents, if applicable.
- Attach an additional page, if needed.

## WARNING AND SIGNATURE

### WARNING

Texas Alcoholic Beverage Code, Section 101.69, states “. . . a person who makes a false statement or false representation in an application for a permit or license or other instrument to be filed with the Commission and required to be sworn commits an offense punishable by imprisonment in the penitentiary for not less than 2 nor more than 10 years.”

### SIGNATURE

**The applicant *must* sign the application.** Signatures must be original.

Signatures and dates are not valid after 90 days of notary date.

All applications must be signed *before* a notary public.

# EXHIBITS



**Exhibit I  
Fee Chart**

## FEE CHART EFFECTIVE 01/01/2009

This chart includes fees and surcharges for licenses and permits on 2 year license/permit schedule. Those classes are indicated by bold text. Classes indicated with an issue date of 01/01/09 or after MUST pay the 2 year license/permit fee. Surcharges are subject to annual change.

Code	Description of Fee	Authorizing Statute TABC Code	Fees	Surcharge	Total Due
<b>LIQUOR PERMITS</b>					
AW	Agent's Manufacturing Warehousing Permit	Ch 55	\$750	\$277	\$1,027
<b>A</b>	<b>Agent's Permit</b> <i>2 year permit</i>	<b>Ch 35</b>	<b>\$20</b>	<b>\$80</b>	<b>\$100</b>
<b>AB</b>	<b>Airline Beverage Permit</b> <i>2 year permit</i>	<b>Ch 34</b>	<b>\$4,400</b>	<b>\$278</b>	<b>\$4,678</b>
<b>PE</b>	<b>Beverage Cartage Permit</b> <i>2 year permit</i>	<b>Ch 44</b>	<b>\$40</b>	<b>\$128</b>	<b>\$168</b>
<b>J</b>	<b>Bonded Warehouse Permit</b> <i>2 year permit</i>	<b>Ch 46</b>	<b>\$300</b>	<b>\$116</b>	<b>\$416</b>
<b>JD</b>	<b>Bonded Warehouse Permit (Dry Area)</b> <i>2 year permit</i>	<b>Ch 46</b>	<b>\$300</b>	<b>\$116</b>	<b>\$416</b>
B	Brewer's Permit	Ch 12	\$1,500	\$245	\$1,745
<b>C</b>	<b>Carrier's Permit</b> <i>2 year permit</i>	<b>Ch 41</b>	<b>\$60</b>	<b>\$214</b>	<b>\$274</b>
<b>CB</b>	<b>Caterer's Permit</b> <i>2 year permit</i>	<b>Ch 31</b>	<b>\$1,000</b>	<b>\$236</b>	<b>\$1,236</b>
TB	Daily Temporary Mixed Beverage Permit (Per Day)	Ch 30	\$50	\$171	\$221
TN	Daily Temporary Private Club Registration Permit	Ch 33	\$50	\$192	\$242
<b>DS</b>	<b>Direct Shipper's Permit</b> <i>2 year permit</i>	<b>Ch 54</b>	<b>\$150</b>	<b>\$320</b>	<b>\$470</b>
<b>D</b>	<b>Distiller's &amp; Rectifier's Permit</b> <i>2 year permit</i>	<b>Ch 14</b>	<b>\$3,000</b>	<b>\$298</b>	<b>\$3,298</b>
<b>FB</b>	<b>Food and Beverage Certificate</b> <i>2 year permit when Subordinate of Liquor</i>	<b>Ch 25</b>	<b>\$200</b>	<b>\$490</b>	<b>\$690</b>
<b>BP</b>	<b>Brewpub License</b> <i>2 year license when Subordinate of MB or RM</i>	<b>Ch 74</b>	<b>\$1,000</b>	<b>\$362</b>	<b>\$1,362</b>
FC	Forwarding Center Authority	Rule 35.6	\$1,000	\$118	\$1,118
<b>I</b>	<b>Industrial Permit</b> <i>2 year permit</i>	<b>Ch 38</b>	<b>\$120</b>	<b>\$222</b>	<b>\$342</b>
E	Local Cartage Permit	Ch 43	\$30	\$86	\$116
ET	Local Cartage Transfer Permit	Ch 42	\$30	\$86	\$116
LP	Local Distributor's Permit	Ch 23	\$100	\$192	\$292
<b>LI</b>	<b>Local Industrial Alcohol Manufacturer's Permit</b> <i>2 year permit</i>	<b>Ch 47</b>	<b>\$200</b>	<b>\$278</b>	<b>\$478</b>
<b>T</b>	<b>Manufacturer's Agent's Permit</b> <i>2 year permit</i>	<b>Ch 36</b>	<b>\$20</b>	<b>\$80</b>	<b>\$100</b>
<b>MR</b>	<b>Market Research Packager's Permit</b> <i>2 year permit</i>	<b>Ch 49</b>	<b>\$200</b>	<b>\$108</b>	<b>\$308</b>
<b>MI</b>	<b>Minibar Permit</b> <i>Original 2 year permit</i>	<b>Ch 51</b>	<b>\$4,000</b>	<b>\$298</b>	<b>\$4,298</b>
			<b>1st Renewal</b>	<b>\$3,000</b>	<b>\$298</b>
			<b>2nd Renewal</b>	<b>\$2,000</b>	<b>\$298</b>
			<b>3rd and All Subsequent Renewals</b>	<b>\$1,500</b>	<b>\$298</b>
<b>MB</b>	<b>Mixed Beverage Permit</b> <i>Original 2 year permit</i>	<b>Ch 28</b>	<b>\$6,000</b>	<b>\$512</b>	<b>\$6,512</b>
			<b>1st Renewal</b>	<b>\$4,500</b>	<b>\$512</b>
			<b>2nd Renewal</b>	<b>\$3,000</b>	<b>\$512</b>
			<b>3rd and All Subsequent Renewals</b>	<b>\$1,500</b>	<b>\$512</b>
<b>RM</b>	<b>Mixed Beverage Permit with FB</b> <i>Original 2 year permit</i>	<b>Ch 28</b>	<b>\$6,000</b>	<b>\$512</b>	<b>\$6,512</b>
			<b>1st Renewal</b>	<b>\$4,500</b>	<b>\$512</b>
			<b>2nd Renewal</b>	<b>\$3,000</b>	<b>\$512</b>
			<b>3rd and All Subsequent Renewals</b>	<b>\$1,500</b>	<b>\$512</b>
<b>LB</b>	<b>Mixed Beverage Late Hours</b> <i>2 year permit</i>	<b>Ch 29</b>	<b>\$300</b>	<b>\$278</b>	<b>\$578</b>
U	Nonresident Brewer's Permit	Ch 13	\$1,500	\$160	\$1,660
S	Nonresident Seller's Permit	Ch 37	\$150	\$160	\$310
P	Package Store Permit	Ch 22	\$500	\$213	\$713
PS	Package Store Tasting Permit	Ch 52	\$25	\$75	\$100
Q	Wine Only Package Store	Ch 24	\$75	\$235	\$310
<b>PT</b>	<b>Passenger Train Beverage Permit</b> <i>2 year permit</i>	<b>Ch 48</b>	<b>\$1,000</b>	<b>\$512</b>	<b>\$1,512</b>
O	Private Carrier's Permit	Ch 42	\$30	\$107	\$137
<b>NE</b>	<b>Private Club Exemption Certificate Permit</b> <i>2 year permit</i>	<b>Ch 32</b>	<b>\$0</b>	<b>\$0</b>	<b>\$0</b>

## FEE CHART EFFECTIVE 01/01/2009

This chart includes fees and surcharges for licenses and permits on 2 year license/permit schedule. Those classes are indicated by bold text. Classes indicated with an issue date of 01/01/09 or after MUST pay the 2 year license/permit fee. Surcharges are subject to annual change.

Code	Description of Fee	Authorizing Statute TABC Code	Fees	Surcharge	Total Due	
<b>LIQUOR PERMITS CONTINUED</b>						
<b>N</b>	<b>Private Club Registration Permit-Option 1</b>	<i>2 year permit</i>				
		<i>0 to 250 Members</i>	<b>Ch 32</b>	<b>\$1,500</b>	<b>\$766</b>	<b>\$2,266</b>
		<i>251 to 450 Members</i>		<b>\$2,700</b>	<b>\$766</b>	<b>\$3,466</b>
		<i>451 to 650 Members</i>		<b>\$3,900</b>	<b>\$766</b>	<b>\$4,666</b>
		<i>651 to 850 Members</i>		<b>\$5,100</b>	<b>\$766</b>	<b>\$5,866</b>
	<i>851 to 1000 Members</i>		<b>\$6,000</b>	<b>\$766</b>	<b>\$6,766</b>	
	<i>Over 1000 Members</i>		<b>\$6 Per Member</b>	<b>\$766</b>	<b>Varies</b>	
<b>N</b>	<b>Private Club Registration Permit-Option 2</b>	<i>Original 2 year permit</i>	<b>Ch 32</b>	<b>\$7,000</b>	<b>\$766</b>	<b>\$7,766</b>
		<i>1st Renewal</i>		<b>\$5,500</b>	<b>\$766</b>	<b>\$6,266</b>
		<i>2nd and All Subsequent Renewals</i>		<b>\$4,000</b>	<b>\$766</b>	<b>\$4,766</b>
<b>NB</b>	<b>Private Club Beer and Wine Permit</b>	<i>2 year permit</i>	<b>Ch 32</b>	<b>\$3,000</b>	<b>\$766</b>	<b>\$3,766</b>
<b>NL</b>	<b>Private Club Late Hours Permit</b>	<i>2 year permit</i>	<b>Ch 33</b>	<b>\$1,500</b>	<b>\$298</b>	<b>\$1,798</b>
L	Private Storage Permit		Ch 45	\$100	\$86	\$186
<b>PR</b>	<b>Promotional Permit</b>	<i>2 year permit</i>	<b>Ch 54</b>	<b>\$600</b>	<b>\$320</b>	<b>\$920</b>
K	Public Storage Permit		Ch 45	\$100	\$86	\$186
W	Wholesaler's Permit		Ch 19	\$1,875	\$298	\$2,173
X	General Class B Wholesaler's Permit		Ch 20	\$300	\$277	\$577
LX	Local Class B Wholesaler's Permit		Ch 21	\$75	\$277	\$352
V	Wine and Beer Retailer's Permit Excursion Boat		Ch 25	\$130	\$235	\$365
Y	Wine and Beer Retailer's Permit Railway Car (Fee - Per Car)		Ch 25	\$30	\$235	\$265
<b>Z</b>	<b>Wine Bottler's Permit</b>	<i>2 year permit</i>	<b>Ch 18</b>	<b>\$450</b>	<b>\$512</b>	<b>\$962</b>
<b>G</b>	<b>Winery Permit</b>	<i>2 year permit</i>	<b>Ch 16</b>	<b>\$150</b>	<b>\$596</b>	<b>\$746</b>
<b>GS</b>	<b>Winery Storage Permit</b>	<i>2 year permit</i>	<b>Ch 45</b>	<b>\$200</b>	<b>\$172</b>	<b>\$372</b>
<b>BEER LICENSES</b>						
<b>BK</b>	<b>Agent's Beer License</b>	<i>2 year license</i>	<b>Ch 73</b>	<b>\$20</b>	<b>\$80</b>	<b>\$100</b>
BC	Branch Distributor's License		Ch 66	\$75	\$298	\$373
BB	General Distributor's License		Ch 64	\$300	\$298	\$598
BI	Importer's License		Ch 67	\$20	\$118	\$138
BJ	Importer's Carrier's License		Ch 68	\$20	\$86	\$106
BD	Local Distributor's License		Ch 65	\$75	\$298	\$373
BA	Manufacturer's License		Ch 62	\$750	\$277	\$1,027
		2nd Establishment		\$1,500	\$277	\$1,777
		3rd, 4th, & 5th Establishments		\$4,275	\$277	\$4,552
		Excess of 5 Establishments		\$8,400	\$277	\$8,677
MW	Manufacturer's Warehouse License		Ch 62	\$300	\$235	\$535
BS	Nonresident Manufacturer's License		Ch 63	\$750	\$245	\$995
FB	Food and Beverage Certificate		Ch 25	\$100	\$245	\$345
BP	Brewpub License		Ch 74	\$500	\$181	\$681
BF	Beer Retailer's Off Premise License		Ch 71	\$60	\$235	\$295
BE	Beer Retailer's On Premise License (Excluding DALLAS, HARRIS, TARRANT Counties)		Ch 69	\$150	\$235	\$385
BE	Beer Retailer's On Premise License (DALLAS, HARRIS, TARRANT Counties)		Ch 69	\$1,000	\$235	\$1,235
		Original		\$750	\$235	\$985
		Renewal		\$750	\$235	\$985
BL	Retail Dealer's On Premise Late Hours License		Ch 70	\$250	\$139	\$389
SL	Storage License		Ch 75	\$200	\$86	\$286
BH	Temporary License		Ch 72	\$30	\$171	\$201
CA	Temporary Charitable Auction Permit		Ch 53	\$25	\$171	\$196
BG	Wine and Beer Retailer's Permit (Excluding DALLAS, HARRIS, TARRANT Counties)		Ch 25	\$175	\$235	\$410
BG	Wine and Beer Retailer's Permit (DALLAS, HARRIS, TARRANT Counties)		Ch 25	\$1,000	\$235	\$1,235
		Original		\$750	\$235	\$985
		Renewal		\$750	\$235	\$985
BQ	Wine and Beer Retailer's Off Premise Permit		Ch 26	\$60	\$235	\$295



Exhibit II  
**License and Permit Descriptions**

## LICENSE AND PERMIT DESCRIPTIONS

**AUTHORIZED BY TEXAS ALCOHOLIC BEVERAGE CODE**

### Liquor Permits

#### **BEVERAGE CARTAGE PERMIT (PE)**

Permit authorizes a *Mixed Beverage, Private Club Registration, Private Club Wine and Beer* or *Private Club Exemption Certificate* permit holder to transport alcoholic beverages to the licensed premises from the place of purchase.

#### **CATERER'S PERMIT (CB)**

Permit authorizes *Mixed Beverage Permit* holder to sell mixed beverages on a temporary basis at a place other than the premises for which the *Mixed Beverage Permit* is issued but only in areas "wet" for the sale of mixed beverages.

#### **FOOD AND BEVERAGE CERTIFICATE (FB)**

A *Food and Beverage Certificate* may be issued to the holder of a *Beer Retailer's On-Premise Permit* or *Wine and Beer Retailer's Permit* if food service is the primary business being operated on the licensed premises or to the holder of a *Mixed Beverage Permit* or *Private Club Permit* if food service is available on the premises and the gross receipts of alcoholic beverages do not exceed 50 percent of total gross receipts. The holder must meet requirements of the Code and Rule 33.5 concerning minimum number of entrees served, hours of service, etc. Certificate allows holder to be exempt from posting a conduct surety bond.

#### **LOCAL CARTAGE PERMIT (E or ET if permit holder is a transfer company)**

Permit authorizes warehouse or transfer companies to transport liquor within city limits. Permit may also be issued to *Package Store* and *Wine-Only Package Store* permit holders to deliver liquor to customer within the city or two-mile limit thereof and transport liquor within the county between his or her other licensed premises.

#### **LOCAL DISTRIBUTOR'S PERMIT (LP)**

Permit authorizes *Package Store* permit holders to sell alcoholic beverages to *Mixed Beverage, Private Club Registration* and *Private Club Exemption Certificate* permit holders.

#### **MINIBAR PERMIT (MI)**

Permit authorizes a mixed beverage permit holder in a hotel to sell alcoholic beverages in the guest rooms of that hotel from a locked container located in the guest rooms.

#### **MIXED BEVERAGE LATE HOURS PERMIT (LB)**

Permit authorizes a *Mixed Beverage* permit holder to sell mixed beverages until 2 A.M.

**MIXED BEVERAGE PERMIT (MB)**

Permit authorizes the holder to sell mixed drinks from unsealed containers and wine, beer, ale and malt liquor in containers of any legal size for on-premises consumption.

**MIXED BEVERAGE RESTAURANT PERMIT WITH FB (RM)**

Permit authorizes a restaurant located in an area voted wet for the legal sale of mixed beverages in restaurant by food and beverage certificate holder to sell mixed drinks, wine, beer, ale and malt liquor for consumption on the premises of the restaurant.

**PACKAGE STORE PERMIT (P)**

Permit authorizes the holder to sell liquor, malt and vinous liquors on or from licensed premises at retail to consumer for off-premises consumption.

**PACKAGE STORE PERMIT (WINE ONLY) (Q)**

Permit authorizes the holder to sell ale, malt liquor, wine and vinous liquors on or from licensed premises at retail to consumer for off-premises consumption. The holder of a wine-only package store permit whose premises is located in a wet area allowing the legal sale of wine for off-premises consumption only as determined by an election held under Section 251.19 may only purchase, sell, or possess vinous liquor only-- no ale or malt liquor on those premises.

**PACKAGE STORE TASTING PERMIT (PS)**

Permit authorizes the holder to conduct product tasting of distilled spirits, wine, beer and malt-based or spirit-based coolers on the licensed premises of the holder's package store during regular business hours.

**WINE AND BEER RETAILER'S PERMIT - EXCURSION BOAT (V)**

Permit authorizes excursion boat to sell and serve beer and wine up to 14 percent or 17 percent (depending on type of local-option election) for consumption on the excursion boat while operating in a wet area.

**WINE AND BEER RETAILER'S PERMIT FOR RAILWAY DINING, BUFFET OR CLUB CARS (Y)**

Permit authorizes railway dining, buffet or club cars to sell and serve beer and wine up to 14 percent or 17 percent (depending on type of local-option election) for consumption on each train car while operating in a wet area.

## Beer Licenses

### **BREW PUB LICENSE (BP)**

License authorizes the holder to manufacture, brew, bottle, can, package and label malt liquor, ale, and beer; sell or offer without charge, on the premises of the brewpub, to ultimate consumers for consumption on or off those premises, malt liquor, ale or beer produced by the holder in or from a lawful container, to the extent the sales or offers are allowed under the holder's other permits or licenses; must be held with permit or license authorizing on-premises consumption. Total production cannot exceed 5,000 barrels for each licensed location.

### **RETAIL DEALER'S OFF-PREMISE LICENSE (BF)**

License authorizes holder to sell beer in a lawful container direct to the consumer but not for resale and not to be opened or consumed on or near the premises.

### **RETAIL DEALER'S ON-PREMISE LATE HOURS LICENSE (BL)**

License authorizes a *Retail Dealer's On-Premise* license or *Wine and Beer Retailer's* permit holder to sell and serve wine, beer, and ale until 2 A.M.

### **RETAIL DEALER'S ON-PREMISE LICENSE (BE)**

License authorizes holder to sell beer for consumption on or off premises in a lawful container to the ultimate consumer but not for resale. Requires adequate seating area for customers.

### **WINE AND BEER RETAILER'S PERMIT (BG)**

Permit authorizes the holder to sell for consumption on or off the premises where sold but not for resale, beer, ale, malt liquor and wine not more than 14 percent or 17 percent (depending on type of local-option election). Requires adequate seating area for customers.

### **WINE AND BEER RETAILER'S OFF-PREMISE PERMIT (BQ)**

Permit authorizes the holder to sell for off-premises consumption only, but not for resale, wine, beer, and malt liquors containing alcohol in excess of one-half of one percent ( $\frac{1}{2}$  of 1%) by volume and not more than 14 percent or 17 percent of alcohol by volume (depending on type of local-option election).

Exhibit III  
**Notice of Application**

Date of Mailing: \_\_\_\_\_

## NOTICE OF APPLICATION

\_\_\_\_\_  
(Resident's Name)

\_\_\_\_\_  
(Resident's Address)

\_\_\_\_\_  
(City, State and ZIP code)

As required by Sec. 11.393 and Sec. 61.382 of the Texas Alcoholic Beverage Code, this serves as notice that plans have been made for an original application to be submitted to the Texas Alcoholic Beverage Commission for a permit authorizing the retail sale or service of alcoholic beverages for on-premises consumption at a location that is within 300 feet of your property line.

Type of Permit/License Sought: \_\_\_\_\_

Type of Business: \_\_\_\_\_

Trade Name of Business: \_\_\_\_\_

Address for which Permit/License is sought: \_\_\_\_\_

Owner's Name: \_\_\_\_\_

Business entities list name and title of each officer or partner:

Officer/Partner Name	Title	Officer/Partner Name	Title
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

It is the policy of the Texas Alcoholic Beverage Commission to provide every interested person a full and fair opportunity to object to the issuance of an alcoholic beverage license or permit based upon legal grounds established under the Texas Alcoholic Beverage Code or other law.

If you want to protest this application, complete a TABC Protest Form and submit it to your local TABC office. Be as detailed as possible when explaining your objection. Click the link below for a copy of the protest form.

You may attach documentation, specific facts and circumstances that substantiate the legal grounds of your objection. Examples of this documentation are as follows:

- Police or administrative violation records which indicate the applicant has not conducted business in keeping with the Texas Alcoholic Beverage Code or the laws of the State of Texas.
- Governmental records or certified documents that show, for example, that the applicant conducted business in a place or manner which was detrimental to the health, safety and welfare of the public.
- Texas Department of Public Safety traffic accident records that show the business location is in a dangerous traffic area.

To review the agency's policy or to download a copy of the form, please visit the TABC web site: <http://www.tabc.state.tx.us>