



PETITION INSTRUCTIONS TO UNILATERALLY AMEND OR TERMINATE A SETTLEMENT AGREEMENT

A licensee that has had a settlement agreement in place for four years or more may apply to unilaterally amend or terminate the agreement during the license renewal period. The request is subject to the review and approval of the Alcoholic Beverage Control Board (Board). In addition, any amendment or termination would require notice to the other parties to the agreement as well as to the public.

A licensee is only eligible to amend or terminate a settlement agreement without the permission of the other parties if the:

1. Agreement has been in effect for four years or more from the date the agreement was approved by the Board.
2. Request is made with the Petition to Unilaterally Amend or Terminate a Settlement Agreement (provided below) or by a written letter which complies with D.C. Official Code § 25-446(d)(2)-(5).
3. Licensee demonstrates that he or she has made a diligent effort to locate the other parties to the settlement agreement. If the other parties to the agreement are located, the applicant must show that he or she made a good faith attempt to amend or terminate the agreement by certifying that:
 - A meeting occurred but did not result in an agreement; or
 - The other parties did not want to meet with the applicant.
4. Applicant submits the Petition to Unilaterally Amend or Terminate a Settlement Agreement or letter along with all of the settlement agreement(s) that the applicant wants to amend or terminate.
5. Licensee signs the petition certification and has the signature(s) notarized.
 - If the applicant is a sole proprietor, the individual must sign; if partnership, each partner must sign; if corporation, the president or vice president must sign; if LLC, the managing member(s) must sign.
6. Request is submitted along with the license renewal application.



**PETITION TO UNILATERALLY AMEND OR TERMINATE
A SETTLEMENT AGREEMENT**

OFFICIAL USE ONLY

Date Accepted:				Accepted by:				
Date Approved by Board: / /	Initial: →							
Date Denied by Board: / /	Initial: →							

TO BE COMPLETED BY APPLICANT

1. Licensee Name (Last, First, Middle):			2. Trade Name:		
3. Current License Class:			4. License Number:		
5. Address:		City:	State:	Zip Code:	
6. Telephone Number:		7. Email:			
8. I have attached the settlement agreement(s) to this petition that I want to amend or terminate. <input type="checkbox"/> YES <input type="checkbox"/> NO					
9. List the date(s) the ABC Board approved the settlement agreement(s):					
10. What action would you like the ABC Board to take regarding your settlement agreement(s)? <input type="checkbox"/> AMEND <input type="checkbox"/> TERMINATE <input type="checkbox"/> BOTH <i>If you are seeking to amend your settlement agreement(s), provide the alternative settlement agreement(s) you want to have attached to your license on a separate sheet of paper.</i>					
11. Have four years elapsed since the date the Board approved the settlement agreement(s)? <input type="checkbox"/> YES <input type="checkbox"/> NO					
12. Is this Petition being submitted with a renewal application and during your establishment's renewal period? <input type="checkbox"/> YES <input type="checkbox"/> NO					
13. List the parties or signatories to the settlement agreement(s) that you want to amend or terminate.					
14. Have you made a diligent effort to locate the parties or signatories to the settlement agreement(s)? <input type="checkbox"/> YES <input type="checkbox"/> NO					
15. Describe your efforts to contact or locate the other parties and the date(s) that your attempts occurred. Attach any supporting documentation (e.g., letters, emails, etc.).					

NOTICE: The District of Columbia will provide the appropriate services and auxiliary aids, including sign language interpreters, whenever necessary to ensure effective communication with members of the public who are deaf, hearing impaired or who have other disabilities affecting communications. Requests for services and auxiliary aids should be made at least ten days prior to any scheduled hearing. Please notify the ADA Coordinator at (202) 442-4423. In order to report fraud, waste, and abuse in the District of Columbia government, call 1-800-521-1638.



Question 15 continued:

16. Choose at least one of the following:

- I affirm that a meeting occurred between the parties to the settlement agreement(s) that did not result in an agreement.
- I affirm that the other parties to the settlement agreement(s) refused to meet with the licensee.

17. Describe how you accomplished the statement(s) that you selected (e.g., date of meeting, etc.) in question 16 and your attempts to negotiate an amendment to your settlement agreement in good faith. Attach any supporting documentation (e.g., emails, letters, etc.)

18. Describe the circumstances beyond your control and/or a change in the neighborhood that requires the amendment or termination of your settlement agreement(s).

19. Provide a detailed explanation as to whether amending or terminating your settlement agreement(s) will have an adverse impact on the relevant locality, section, or portion of the District where your establishment is located.

20. If the applicant is a sole proprietor, the individual must sign; if partnership, each partner must sign; if corporation, the president or vice president must sign; if LLC, each managing member must sign the below certification. All signatures must be notarized.

Certification: "I hereby certify under penalty of perjury that the information in this application is true and correct. I also certify that the above licensee is the true and actual owner of the business."

Print Name: _____ Signature: _____ Date: _____

Subscribed and sworn to before me _____ on this ____ day of ___, 20___. My commission expires on _____.
(Notary Signature)

Print Name: _____ Signature: _____ Date: _____

Subscribed and sworn to before me _____ on this ____ day of ___, 20___. My commission expires on _____.
(Notary Signature)

8. In what language do you need vital documents translated? _____