ALCOHOLIC BEVERAGE LICENSE APPLICATION INSTRUCTIONS

The following instructions are intended for manufacturer, wholesaler and retailer applicants for alcoholic beverage licenses in the District of Columbia.

GENERAL APPLICATION INSTRUCTIONS

- The term "applicant", referenced in question 9 of this application, designates the person in whose name the license will be issued if the application is approved. An applicant can designate another individual to pick up the license; however, the applicant must submit written authorization to the Alcoholic Beverage Regulation Administration (ABRA).
- An applicant must be at least 21 years of age and provide a valid government issued form of identification.
- Applications must be submitted in person. File two copies of the application.
- Applications will only be accepted when all information is provided**.**
- Attach extra documents if necessary. Print your name on the top of each document. Write "see attachment" on the form.

LICENSE CATEGORIES AND TYPES

An applicant may apply for the following license categories and types (see questions 1-3 of the application):

- Manufacturer Class A: Permits the production of spirits and wine (wine includes cider).
- Manufacturer Class B: Permits the production of beer.
- Manufacturer Class C: Permits the production of baked goods with a maximum of 5 percent of alcohol per volume.
- Wholesaler Class A: Permits the distribution and sale of spirits, beer, and wine.
- Wholesaler Class B: Permits the distribution and sale of beer and wine.
- Off-premises Retailer Class A: Permits the sale of spirits, beer, and wine for consumption off the licensed premises.
- Off-premises Retailer Class B: Permits the sale of beer and wine for consumption off the licensed premises.
- On-premises Retailer Class C: Permits the sale, service, and consumption of spirits, beer, and wine at a restaurant, tavern, nightclub, hotel, and multipurpose facility.
- On-premises Retailer Class D: Permits the sale, service, and consumption of beer and wine at a restaurant, tavern, nightclub, hotel, and multipurpose facility.
- Club Class C: Permits consumption of spirits, beer, and wine at a club.
- Club Class D: Permits consumption of beer and wine at a club.
- Common Carrier Class C: Permits the sale, service, and consumption of spirits, beer, and wine on a passenger carrying train or boat.
- Common Carrier Class D: Permits the sale, service, and consumption of beer and wine on a passenger carrying train or boat.

ENDORSEMENT AND PERMIT TYPES

An applicant may apply for the following endorsements and permits (see questions 4-5 of the application):

- Entertainment Endorsement: There are three different types of entertainment endorsement categories that allow a licensee to either provide live entertainment, dancing, or charge a cover. Restaurants, taverns, and hotels that want to provide entertainment, dancing, or charge a cover can apply for one, two, or all three endorsement categories.
- Summer Garden or Sidewalk Café Endorsement: Allows a manufacturer holding an on-site sales and consumption permit, restaurant, tavern, multipurpose facility, hotel, or nightclub to sell, serve, and allow the consumption of alcoholic beverages on outdoor private or public space.
- Tasting Permit: Allows a manufacturer or retailer to provide customers with a tasting of products on a portion of their licensed premises.
- Brew Pub Permit: Allows a licensee to brew beer on or adjacent to the premises and to sell the beer for consumption at a licensed restaurant, tavern, multipurpose facility, hotel, or nightclub. Also allows the licensee to sell the beer to wholesalers.
- Wine Pub Permit: Allows a licensee to manufacture wine on or adjacent to the premises and to sell the wine for consumption at a licensed restaurant, tavern, multipurpose facility, hotel, or nightclub. Also allows the licensee to sell the wine to wholesalers.

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- Distillery Pub Permit: Allows an on-premises establishment to manufacture, distill, and store craft liquors on the licensed premises or in an area immediately adjacent to the premises.
- Manufacturer's On-Site Sales and Consumption Permit: Allows a spirit, beer, or wine manufacturer to sell their products for consumption on their licensed premises.

LICENSE STATUS DEFINITIONS

There are several license status types (see question 6 on the application):

- Safekeeping: A license would need to be put into safekeeping if the business is not currently operating.
- 404.2 Status: Allows an applicant to obtain approval of the application prior to the issuance of all licenses and permits so long as the applicant has obtained a Certificate of Occupancy. Applicants must apply for 404.2 status. Review section 404 of the District of Columbia Municipal Regulations.
- 405.1 Status: Allows an applicant to obtain approval of a license prior to receiving the Certificate of Occupancy. Applicants must apply for 405.1 status. Review section 405 of the District of Columbia Municipal Regulations.
- No Substantial Change: Applies if a license is being transferred to a new owner and no changes are being made to the business.
- Substantial Change: Applies if a license is being transferred to a new owner and changes are being made to the business.

ALCOHOLIC BEVERAGE LICENSE APPLICATION INSTRUCTIONS

Complete all sections of the application. If a section does not apply, write "not applicable".

- If you are a manufacturer, skip questions 4 and 8. If you are a wholesaler, skip questions 3-5 and 8.
- If you are a restaurant operating in a hotel, note the following in section 3:
    - A restaurant operating inside of a hotel is eligible to apply for a hotel license provided that the restaurant has a written agreement with the hotel to sell and serve alcoholic beverages in the hotel's dining rooms, lounges, banquet halls, other similar facility, or in the private rooms of registered guests.
- In section 4, applicants of restaurants, taverns, and hotels can check the boxes for any requested entertainment endorsement categories.
- In section 7, list the maximum number of seats. If this is a 405.1 application, provide the number of seats requested.
- In section 7a, list the total occupancy load, including seats, as it appears on the Certificate of Occupancy. If a Certificate of Occupancy has not yet been issued, provide the total occupancy load requested.
- In section 9, print the individual's name (last name, first name, middle initial) if the applicant is a sole proprietor or a partnership. If the applicant is a business entity, print the entity's name.
- In section 10, print the applicant's proposed trade name.
- Remember to have the appropriate parties sign the form as instructed above and to notarize all signatures.

FEES

License fees vary based on license type and class as well as capacity of the establishment. The Licensing Division will notify an applicant of the total licensing fee due. Payment can be made in the form of a cashier's check, certified check, business check, attorney's check, personal check, or money order. A check or money order must be payable to the D.C. Treasurer. Payment may also be made by Visa or MasterCard. Fees are as follows:

- Application processing - $75
- Entertainment Endorsement - 20 percent of the base licensing fee (the fee is not prorated)
- Summer Garden/Sidewalk Café - $75
- Distillery Pub Permit - $7,500
- Brew Pub Permit - $3,900
- Wine Pub Permit - $5,000
- Manufacturer's On-Site Sales and Consumption Permit - $1,000
- Tasting Permit - $130
- Transfer of a license to a new owner or new location - $250
- Change of officer, director, stockholder, or general or limited partner - $100
- Corporate or trade name change - $50

An additional $50 inspection fee may be assessed if a permit is applied for after the original license is granted.

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NOTARIZE FORMS

On each form of the application, the certification must be signed by the following. All signatures must be notarized.

- If the applicant is a sole proprietor, the individual must sign.
- If the applicant is a partnership, all partners must sign and submit a copy of the partnership agreement.
- If the applicant is a corporation, the president or vice president must sign.
- If the applicant is an LLC, the managing member(s) must sign.
- If the applicant is a Limited Partnership, the general partner(s) must sign.

BUSINESS INFORMATION FORM INSTRUCTIONS

Complete all sections of the application. If a section does not apply, write "not applicable".

- In section 10, list all hours of operation from Sunday through Saturday.
- Remember to have the appropriate parties sign the form as instructed above and to notarize all signatures.

BUSINESS INFORMATION RELEASE AUTHORIZATION INSTRUCTIONS

This form allows ABRA personnel to investigate the business and the information provided in this application. The following must sign the form and the signature must be notarized:

- If the applicant is a corporation, the president or vice president must sign.
- If the applicant is an LLC, the managing member(s) must sign.

PERSONAL INFORMATION RELEASE AUTHORIZATION INSTRUCTIONS

This form allows ABRA personnel to investigate applicants and the information provided in the application. Each sole proprietor, partner, corporate officer, director of corporation, managing member, and general partner must complete an information release authorization affidavit.

- The person completing the release authorization must sign the form. The signature must be notarized.

PERSONAL HISTORY AFFIDAVIT INSTRUCTIONS

Each sole proprietor, partner, corporate officer, director, managing member, general partner, investor, or any other person, or officer with an ownership interest of 10 percent or more must complete a personal history affidavit.

- The person completing the personal history must sign the form. The signature must be notarized.

FINANCIAL AFFIDAVIT INSTRUCTIONS

All applicants must complete this form.

- Ensure section B exceeds section A.
- Applicants may be required to provide actual documentation of the source of money.
- Remember to have the appropriate parties sign the form as instructed above and to notarize all signatures.

LANDLORD AFFIDAVIT INSTRUCTIONS

This form must be completed by the landlord, if applicable.

TRANSFER CONSENT FORM INSTRUCTIONS

This form must be completed by the transferor pursuant to the license.

- Remember to have the appropriate parties sign the form as instructed above and to notarize all signatures.

PROVIDE REQUIRED DOCUMENTS

1. Police Clearance: All applicants must obtain a police clearance from the District of Columbia's Metropolitan Police Department located at 300 Indiana Avenue, NW, Washington, DC 20001. An applicant must also submit a police clearance from the local jurisdiction in which the applicant currently resides if it is outside of the District.
2. Court Disposition: All persons with a misdemeanor conviction during the last 5 years or a felony conviction during the last 10 years must submit a copy of the court disposition.
3. Lease: If you are leasing a space, provide a copy of the signed lease or letter of intent to lease. All lease documents must be:
    - In the applicant's name, i.e., sole proprietor, partnership, LLC, corporation, etc.

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- Signed by the property owner; and
- Contain specific authorization to sell and serve alcoholic beverages on the premises.

4. Other Licenses: Submit copies of all business licenses, including restaurant, grocery store, delicatessen, public hall, billiards, etc.
    - Class C and D establishments must have a restaurant license.
5. Photographs: Submit 5"X 7" or 7 ½" X 10" photographs depicting the exterior and interior of the premises. Photographs are to be submitted prior to the issuance of the license.
6. Menu: A copy of the menu must be provided if the applicant is applying for a class C or D license.
7. Tax Documents: All applicants must file for a D.C. Business Tax number at the Office of Tax and Revenue (OTR). All transferors and any transferee's whose entity has been in existence for more than 90 days must submit a Clean Hands Certification from OTR.
8. Documents needed from the Department of Consumer and Regulatory Affairs (DCRA):
    - The Certified Articles of Incorporation and Certificate of Incorporation must be submitted if you are a corporation or if the general partner in an LLC is a corporation. Minutes with the corporate seal of the board of director's meeting verifying the election of the officers and a copy of stock certificates must also be submitted.
    - Articles of Organization, the Operating Agreement, Certificate of Organization, and Certificate of Good Standing must be submitted if you are an LLC. Minutes of the board of director's meeting verifying the election of the officers and a copy of stock certificates must also be submitted.
    - Certificate of Occupancy must be submitted by all applicants. If it has not yet been issued, apply for a Zoning Certificate and submit a letter requesting approval of the license under section 405.1 of the District of Columbia Municipal Regulations.
9. If you are applying for a summer garden/sidewalk café, provide the following:
    - Copy of the Certificate of Occupancy indicating the number of seats for the establishment and summer garden. Indicate on the DCRA application that you are requesting a summer garden.
    - Letter from the landlord giving permission to the applicant to sell and serve alcoholic beverages on the summer garden.
    - Certificate of Use and a Public Space Permit is required for a sidewalk café. This document may be obtained from the District Department of Transportation (DDOT).
    - A photograph or diagram of the establishment is required denoting the designated area for the summer garden/sidewalk café.
    - The hours listed may not exceed DDOT or Alcoholic Beverage Control Board approved hours.

ATTORNEY/AGENT DESIGNATION INSTRUCTIONS

The designated attorney/agent must complete this form, if applicable. The signature does not need to be notarized.

GUIDELINES FOR REQUESTING A STIPULATED LICENSE

A stipulated license allows an applicant to sell and serve alcoholic beverages on the premises during the 45-day public comment period; however, the application must be placarded by ABRA before the stipulated license can be issued by the Alcoholic Beverage Control Board. Only the following can apply for a stipulated license for a new, transfer to a new location, or substantial change application:

- Manufacturers with class A and B licenses;
- Wholesalers with class A and B licenses; and
- Retailers with class A, B, C, and D licenses.

In order to request a stipulated license, an applicant must submit the following to the Alcoholic Beverage Control Board:

- A completed alcoholic beverage license application;
- A written request that includes the applicant's name, trade name, and address of the premises; and
- A letter from the Advisory Neighborhood Commission (ANC) that is signed by the chairperson and showing that the ANC voted—with a quorum—in support of or not objecting to the stipulated license request.

PLACARD REQUIREMENTS

License applications for retailers are subject to a 45-day placard period during which the community can protest the application. Applications that are not protested generally take 12 weeks to be issued, if approved. Upon acceptance of your application, a

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licensing specialist will provide you with placards and instructions for the advertisement of the application. An applicant for a new retailer's license or one to be transferred to a new location must provide notice to the public 45 days prior to receiving the license.

LICENSE TRANSFERS TO NEW LOCATIONS AND SETTLEMENT AGREEMENTS

Applicants applying to transfer a license—that has an existing settlement agreement—to a new location without the settlement agreement will need to provide a letter to the Alcoholic Beverage Control Board stating the request. In addition, the request must demonstrate to the satisfaction of the Alcoholic Beverage Control Board that the request will not:

- Adversely affect the locality, section, or portion of the District where the establishment is to be located under the appropriateness standards set forth in § 25-313 160; and
- None of the provisions of the existing settlement agreement, or the agreement in its entirety, are applicable to the new location.

Attach the document stating the request to the license application.

APPLICABLE OFFICE LOCATIONS

- Alcoholic Beverage Regulation Administration: 2000 14th Street, NW, Suite 400 South, Washington, DC 20009
- Department of Consumer Regulatory Affairs Business Service Center: 1100 4th Street, SW, Washington, DC 20024
- Office of Tax and Revenue: 1101 4th Street, SW, Suite 270 West, Washington, DC 20024

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FOR OFFICIAL USE ONLY OFFICE OF TAX & REVENUE (OTR) _____ SIGNATURE _____ DATE

ALCOHOLIC BEVERAGE LICENSE APPLICATION

License Number:		Date Accepted:		Accepted by:		Hearing Date:		
Fees Paid: $	From:		To:	Issue Date:	From:		To:	
Date Approved by Board: / /	Initial:							
Date Denied by Board: / /	Initial:							
Ward/ANC:	☐ New	☐ Transfer (new location with SA)	☐ Transfer (new location without SA)	☐ Transfer with sale	☐ Transfer without sale	☐ Stock Transfer	☐ Storage	☐ Premise

TO BE COMPLETED BY APPLICANT

1. CATEGORY	2. CLASS	3. TYPE		4. ENTERTAINMENT ENDORSEMENT	5. ENDORSEMENT	6. OTHER TYPES
☐ Manufacturer ☐ Wholesaler ☐ Retailer	☐ A ☐ B ☐ C ☐ D	☐ Restaurant ☐ Tavern ☐ Nightclub ☐ Hotel ☐ Multi-Purpose Facility ☐ Club	☐ Common Carrier ☐ Full-Service Grocery (Class B Only) ☐ 25 Percent Class B ☐ Distillery ☐ Winery ☐ Brewery ☐ Bakery	☐ Entertainment ☐ Dancing ☐ Cover Charge	☐ Sidewalk Café ☐ Summer Garden ☐ Tasting Permit ☐ Brew Pub ☐ Wine Pub ☐ Distillery Pub ☐ One Site Sales and Consumption	☐ Safekeeping ☐ 404.2 ☐ 405.1 ☐ No Substantial Change ☐ Substantial Change

7. Maximum Number of Seats:	7a. Total Occupancy Load:	8. Number of Hotel Rooms:

9. Applicant (Last Name, First Name, Middle Initial)/Entity:	10. Trade Name:
11. Business Address:	12. Mailing Address (if different from business address) :

13. Business Telephone: ( )	14. Fax Number: ( )	15. Email Address:

16. Type of Applicant: ☐ Sole Proprietor ☐ Corporation ☐ Partnership ☐ LLC ☐ Other (LLP or LP)

17. List the name of the sole proprietor and all partners below:

18. List names(s) and title(s) of all corporate officers, LLC managing members, and general partners that have ownership interest:		Number of Shares	Percent of Interest

19. List the total number of stocks and shares distributed by the corporation: _____ Authorized: _____
Issued: _____

20. In the past 10 years, has any administrative action been taken against the applicant or any person listed above regarding ABC violations in the District of Columbia or any state? ☐ Yes ☐ No You must answer yes if another establishment owned or controlled by the applicant or a person listed above has been found in violation of the District's alcohol laws. Attach a sheet explaining the administrative action that was taken, location of action, and the disposition.

21. Note on certification: if the applicant is a sole proprietor, the individual must sign; if partnership, each partner must sign; if corporation, president or vice president must sign; if LLC, managing member must sign. Certification: I hereby certify under penalty of perjury that the information in this application is true and correct. I also certify that the above applicant is the true and actual owner of the business.

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Print Name: _____ Signature:_____ Subscribed and sworn to before me _____ on this _____ day of _____, 20_____. My commission expires: _____ (Notary Public Signature)
Print Name: _____ Signature: _____ Subscribed and sworn to before me _____ on this _____ day of _____, 20_____. My commission expires: _____ (Notary Public Signature)
22. What language do you need vital documents translated?

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BUSINESS INFORMATION

1. Business Address:		
2. Trade Name:	3. Floor(s) for Storage Areas:	4. Floor(s) of Licensed Business:

5. Will you be the true and actual owner of the business ☐Yes ☐No If no, please explain in an affidavit. Attach the affidavit.

6. Will any other business be conducted on the premises? ☐ Yes ☐ No If yes, please explain:

7. Do you have or have you previously held a license for the sale of alcoholic beverages? ☐Yes ☐ No If yes, please explain:

8. Will any portion of the premises be used for a dwelling or a lodging house? ☐Yes ☐ No
If yes, is there interior access to the living quarters from the licensed area? ☐Yes ☐ No

9. Does any manufacturer, brewery, distiller, wholesaler or solicitor of alcoholic beverages, or any employee thereof, or any other individual or corporations have any financial interest directly or indirectly in this business or any other business holding an ABC license? ☐Yes ☐ No
If yes, please explain:

10. List all hours below:

Days	a. Hours of Operation	b. Hours of Alcoholic Beverage Sales/Service/Consumption	c. Hours of Live Entertainment (Indoors)
Sunday	From _____ To _____	From _____ To _____	From _____ To _____
Monday	From _____ To _____	From _____ To _____	From _____ To _____
Tuesday	From _____ To _____	From _____ To _____	From _____ To _____
Wednesday	From _____ To _____	From _____ To _____	From _____ To _____
Thursday	From _____ To _____	From _____ To _____	From _____ To _____
Friday	From _____ To _____	From _____ To _____	From _____ To _____
Saturday	From _____ To _____	From _____ To _____	From _____ To _____

List all hours for a summer garden/sidewalk café below:

Days	d. Hours of Operation	e. Hours of Alcoholic Beverage Sales/Service/Consumption	f. Hours of Live Entertainment (Outdoors)
Sunday	From _____ To _____	From _____ To _____	From _____ To _____
Monday	From _____ To _____	From _____ To _____	From _____ To _____
Tuesday	From _____ To _____	From _____ To _____	From _____ To _____
Wednesday	From _____ To _____	From _____ To _____	From _____ To _____
Thursday	From _____ To _____	From _____ To _____	From _____ To _____
Friday	From _____ To _____	From _____ To _____	From _____ To _____

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Saturday	From _____ To _____	From _____ To _____	From _____ To _____

11. If you checked the box for a tasting permit in question 5 of the Alcoholic Beverage License Application, initial in the space provided that you understand that your tasting hours may not exceed your approved alcoholic beverage hours. _____

12. Provide the name, address and distance (in feet) of the following. Note that this section does not apply to retailers selling alcoholic beverages **only** through the Internet.

	Name	**Address**	**Distance**
School			
Public Library			
Day Care Center			
Recreation Center			

13. How were the above distances measured?

Answer the following if you are an off-premises consumption establishment.

14. If the application is for a class A or B retailer's license, indicate whether there is another ABC licensed establishment of the same class within 400 feet of your establishment? ☐Yes ☐No If yes, provide the name, address, and distance of the establishment:

15. Answer the following if you are applying for a restaurant, tavern, nightclub, hotel, club, multi-purpose facility, boat, or train license.

If the application is for a class C or D retailer's license, describe the nature of the operations, including: type of food served, type of entertainment offered, including nude performance(s), and any goods and services to be provided. If dancing is provided, indicate the dimension of the dance floor(s) and the location(s).

16. Answer the following if you are applying for a restaurant, hotel, or tavern license.

If you checked cover charge in section 4 of the Alcoholic Beverage License Application and have a Certificate of Occupancy over 400 persons, please provide the following:

1) Copy of Public Hall Certificate of Occupancy from the Zoning Administrator; and
2) Copy of Entertainment Endorsement for a Public Hall from the Department of Consumer and Regulatory Affairs.

17. Answer the following if you are an applicant for a restaurant or hotel license.

a. What are your projected gross annual receipts from food sales for the next 12 months ($).
How did you arrive at this amount?

b. What are your projected gross annual receipts from alcoholic beverage sales for the next 12 months? ($).
How did you arrive at this amount?

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18. Answer the following if you are applying for a new license, transferring ownership with a substantial change, or transferring to a new location.
a. Provide a detailed explanation as to what effect your establishment will have on real property values on the relevant locality, section, or portion of the District of Columbia:
b. Provide a detailed explanation as to what effect your establishment will have on peace, order, and quiet including noise and litter, on the relevant locality, section or portion of the District of Columbia:
c. Provide a detailed explanation as to what effect your establishment will have upon residential parking needs, vehicular traffic, and pedestrian safety:
Note on certification: if the applicant is a sole proprietor, the individual must sign; if partnership, each partner must sign; if corporation, president or vice president must sign; if LLC, managing member must sign. Certification: I hereby certify under the 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:_____ Subscribed and sworn to before me _____ on this _____ day of _____, 20_____. My commission expires: _____ (Notary Public Signature)
Print Name:_____Signature:_____ Subscribed and sworn to before me _____ on this _____ day of _____, 20_____. My commission expires: _____ (Notary Public Signature)
Print Name:_____Signature:_____ Subscribed and sworn to before me _____ on this _____ day of _____, 20_____. My commission expires: _____ (Notary Public Signature)

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LANDLORD AFFIDAVIT

1.	Are you the landlord of the premises stated on the attached alcoholic beverage license application? ☐ Yes ☐ No
2.	Address of property upon which business is to be conducted:
3.	Name and address of the true and actual owner of the property:
4.	Does a manufacturer or wholesaler have any direct or indirect financial interest in the property or business, including any money, equipment, furniture, fixtures or property either given, rented or loaned to landlord? ☐Yes ☐ No If yes, please explain:
5.	As the owner of the property do you have any financial interest, directly or indirectly, in the alcoholic beverage license (i.e. lease, security agreement)? ☐Yes ☐ No If yes, please explain:
5a.	Do you hold any other alcoholic beverage license in the District of Columbia? ☐Yes ☐No If yes, please explain: (Copies of any financial interest in the license should be attached).
Note on certification: if the applicant is a sole proprietor, the individual must sign; if partnership, each partner must sign; if corporation, president or vice president must sign; if LLC, managing member must sign.	
6.	Certification: I hereby certify under penalty of perjury that the information in this application and attachments are true and correct.
Print Name: _____ Signature:_____ Subscribed and sworn to before me _____ on this _____ day of _____, 20_____. My commission expires: _____ (Notary Public Signature)	
Print Name: _____ Signature:_____ Subscribed and sworn to before me _____ on this _____ day of _____, 20_____. My commission expires: _____ (Notary Public Signature)	
Print Name: _____ Signature:_____ Subscribed and sworn to before me _____ on this _____ day of _____, 20_____. My commission expires: _____ (Notary Public Signature)	

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TRANSFER CONSENT FORM

1. CATEGORY	2. CLASS	3. TYPE		4. ENTERTAINMENT ENDORSEMENT	5. ENDORSEMENT	6. OTHER TYPES
☐ Manufacturer ☐ Wholesaler ☐ Retailer	☐ A ☐ B ☐ C ☐ D	☐ Restaurant ☐ Tavern ☐ Nightclub ☐ Hotel ☐ Multi-Purpose Facility ☐ Club	☐ Common Carrier ☐ Full-Service Grocery (Class B Only) ☐ 25 Percent Class B ☐ Distillery ☐ Winery ☐ Brewery ☐ Bakery	☐ Entertainment ☐ Dancing ☐ Cover Charge	☐ Sidewalk Café ☐ Summer Garden ☐ Tasting Permit ☐ Brew Pub ☐ Wine Pub ☐ Distillery Pub ☐ On-Site Sales and Consumption	☐ Safekeeping ☐ 404.2 ☐ 405.1 ☐ No Substantial Change ☐ Substantial Change

7. Type of Applicant: ☐ Sole Proprietor ☐ Corporation ☐ Partnership ☐ LLC ☐ Other (LLP or LP)

8. Individual (Last Name, First Name, Middle Initial)/Entity:	9. Trade Name:

10. License #:	11. Business Address:	12. Email:

13. In the past 10 years, has any administrative action been taken against the applicant or any person listed above regarding ABC violations in the District of Columbia or any state? ☐ Yes ☐ No

You must answer yes if another establishment owned or controlled by the applicant or a person listed above has been found in violation of the District's alcohol laws. Attach a sheet explaining the administrative action that was taken, location of action, and the disposition.

Note on certification: if applicant is a sole proprietor, the individual must sign; if partnership, each partner must sign; if corporation, president or vice president must sign; if LLC, managing member must sign.

14. Certification: I hereby certify under penalty of perjury that the information in this form is true and correct and that the above is the true and actual owner of the business. It is being requested that the Alcoholic Beverage Control Board approve the transfer of this license to: _____. I also represent that there are no pending actions against the licensed business entity in the Federal or District of Columbia courts or before the Alcoholic Beverage Control Board for violating Title 25 of the D.C. Official Code.

Print Name: _____ Signature:_____

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

Print Name: _____ Signature:_____

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

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.

Print Name: _____Signature:_____

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

Print Name: _____ Signature:_____

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

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NO SUBSTANTIAL CHANGE

Trade Name (Print):	Address (Print):	Email (Print):

Note on certification: if applicant is a sole proprietor, the individual must sign; if partnership, each partner must sign; if corporation, president or vice president must sign; if LLC, managing member must sign.

Certification: I certify that no change, which could be deemed a substantial change to the business, will occur before this license period expires as set forth in DC Official Code § 25-762. In addition, we certify that there will be no change to the exterior or interior of the building after the submission of the last photographs.

Transferee Print Name:_____ Title: _____

Signature: _____

Subscribed and sworn to before me _____ on this _____ day of_____, 20_____.
(Notary Public Signature)

My commission expires: _____

Transferee Print Name:_____ Title: _____

Signature: _____

Subscribed and sworn to before me _____ on this _____ day of_____, 20_____.
(Notary Public Signature)

My commission expires: _____

Transferee Print Name:_____ Title:_____

Signature: _____

Subscribed and sworn to before me _____ on this _____ day of_____, 20_____.
(Notary Public Signature)

My commission expires: _____

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SUMMARY OF SHARES/PERCENTAGE OF INTEREST

This form must be completed by any person including the president, vice president, secretary, treasurer, director(s) that own stock. Indicate on the form the number of shares owned. Any person including managing member(s), limited partner(s) that own 10 percent interest or more in the entity must also complete this form. All persons holding shares/interest in an alcoholic beverage licensed establishment must be 21 years of age.

1. Entity Name:		**2. Trade Name:**		
3. Name (Last Name, First Name, Middle Initial):	**4. Title:**	**5. Email Address:**	**6. No. of Shares:**	**7. Percentage of Interest:**

8. Certification: "I hereby certify under penalty of perjury that the information in this application is true and correct."
Print your name and have your signature notarized.

Print Name: _____ Signature:_____

Subscribed and sworn to before me _____ on this _____ day of _____, 20_____. My commission

expires: _____ (Notary Public Signature)

Print Name: _____ Signature:_____

Subscribed and sworn to before me _____ on this _____ day of _____, 20_____. My commission

expires: _____ (Notary Public Signature)

Print Name: _____ Signature:_____

Subscribed and sworn to before me _____ on this _____ day of _____, 20_____. My commission

expires: _____ (Notary Public Signature)

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FINANCIAL AFFIDAVIT

Trade Name: _____

A. COST/EXPENSES

1. Purchase price for stock/interest: $_____
2. Down payment: $_____
3. Amount financed: $_____
4. Working capital: $_____
5. Inventory: $_____

TOTAL COST OF EXPENSES: $_____

B. Source of funds to satisfy the transaction. The total source of funds must be equal to or greater than the total cost

Expenses.

6. Cash on hand:	SEE (C)	$_____
7. Savings account:	SEE (C)	$_____
8. Checking account:	SEE (C)	$_____
9. Certification of deposit:	SEE (C)	$_____
10. Promissory notes:	SEE (C)	$_____
11. Loan(s):	SEE (C)	$_____
12. Other:	SEE (C)	$_____
	TOTAL SOURCE OF FUNDS:	$_____

C. Note: Account for funds dispersed to satisfy the transaction prior to the application.

Note on certification: if the applicant is a sole proprietor, the individual must sign; if partnership, each partner must sign; if corporation, president or vice president must sign; if LLC, managing member must sign.

D. Certification: "I hereby certify under penalty of perjury that the information in this application is true and correct."

Print Name:_____ Signature: _____

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

Print Name:_____ Signature:_____

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

Print Name:_____ Signature: _____

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

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Personal History Affidavit

Sole Proprietor, Partner(s), Corporate Officer(s), Director(s), Managing Member(s), General Partner(s), Investor(s), or any person or any officer in an entity that has an ownership interest of 10% or more.

1. ☐ New Application	**2. ☐ Transfer Application**	**3. ☐ Stock Transfer Application**	
4. Trade Name		**5. E-mail address**	
6. Name (Last, First, Middle Initial):		**7. Title**	
8. Residential Address:	**City**	**State**	**Zip Code**
9. Home Telephone Number:	**10. Date of Birth:**	**11. Place of Birth:**	
12. Are you eligible to work in the United States? ☐ Yes ☐ No If yes, please bring in qualifying documents and provide the information below:			
13. a. US Passport b. Naturalization papers c. Work permit d. Green card e. Visa	**f. Certificate number:**	**g. Expiration date:**	
14. Have you ever: a. received or applied for any alcoholic beverage license in D.C. or any state or territory ☐ Yes ☐ No b. had any alcoholic beverage license suspended or revoked ☐ Yes ☐ No c. been convicted of a misdemeanor during the last five (5) years or a felony during the last ten (10) years *(If yes, attach a copy of the court dispositon(s).)* ☐ Yes ☐ No			
15. Does any member of your immediate family now hold an ABC license or have any financial interest, directly or indirectly, in any ABC licensed establishment in the District of Columbia?		**☐ Yes ☐ No**	
16. If you have answered yes to question 13 or 14, please provide detailed information below.			
17. Certification: I hereby certify under penalty of perjury that the information in this application is true and correct.			
Print Name:_____ Signature:_____ Subscribed and sworn to before me _____ on this _____ day of _____, 20_____. My commission expires: _____ (Notary Public)			

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PERSONAL INFORMATION RELEASE AUTHORIZATION

***NOTE: An Information Release Authorization must be completed if you are one of the following: Sole Proprietor, Partner(s), Corporate Officers, Directors of Corporation, Managing Member(s), General Partner(s).**

CAREFULLY READ THIS AUTHORIZATION TO RELEASE INFORMATION ABOUT YOU, THEN SIGN AND DATE IN INK.

I authorize any agent from the Alcoholic Beverage Regulation Administration, to obtain any information, relating to my activities, from employers, criminal justice agencies, financial or lending institutions, credit bureaus, consumer reporting agencies and retail business establishments, or individuals. This information may include, but is not limited to, my residential, personal, or criminal history record and financial and credit information.

I further authorize release of my criminal history from criminal justice agencies for the purposes of determining my eligibility for a liquor license as either a licensee and/or investor. I understand that the information released is for official use by the Alcoholic Beverage Regulation Administration, and that these users may re-disclose this information as authorized by law.

I release any individual, including records custodians, from all liability for damages that may result to me because of compliance, or any attempts to comply, with this authorization. This release is binding, now and in the future, on my heirs, assignees, associates and personal representative(s) of any nature. Copies of the authorization that show my signature are as valid as the original release signed by me.

Failure to complete this form may result in delays of obtaining your license and may result in the license being denied if this information cannot otherwise be obtained.

_____	_____
Full Name (Print)	**Other Names Used (Print)**
_____	_____
Current Address	**Social Security Number**
_____	_____
Home Telephone Number	**Date**

I hereby certify under penalty of perjury that the foregoing information is true and correct. I further, hereby, authorize the Alcoholic Beverage Control Board or its employees to investigate any and all of the information provided by me in this application for an ABC License.

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

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BUSINESS INFORMATION RELEASE AUTHORIZATION

***NOTE: An Information Release Authorization must be completed for your business entity. Either the President of Vice-President may sign if your business entity is a Corporation; Either a Managing Member(s) of General Partner(s) may sign if your business entity is a Limited Liability Company.**

CAREFULLY READ THIS AUTHORIZATION TO RELEASE INFORMATION ABOUT YOU, THEN SIGN AND DATE IN INK.

I authorize any agent from the Alcoholic Beverage Regulation Administration, to obtain any information, relating to the business entity's activities, financial or lending institutions, credit bureaus, consumer reporting agencies and retail business establishments, or individuals. This information may include all aspects of the business entity.

I release any individual, including records custodians, from all liability for damages that may result to me because of compliance, or any attempts to comply, with this authorization. This release is binding, now and in the future, on my heirs, assignees, associates and personal representative(s) of any nature. Copies of the authorization that show my signature are as valid as the original release signed by me.

Failure to complete this form may result in delays of obtaining your license and may result in the license being denied if this information cannot otherwise be obtained.

_____	_____
Name of Business Entity	**Address**
_____	_____
FEIN #	
_____	_____ _____
Full Legal Name	**Title** **Date**

I hereby certify under penalty of perjury that the foregoing information is true and correct. I further, hereby, authorize the Alcoholic Beverage Control Board or its employees to investigate any and all of the information provided by me in this application for an ABC License.

_____	Subscribed and sworn to before me	_____	My commission
Signature	on this _____ day of___, 20___.	Notary Public	expires on _____.

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ATTORNEY/AGENT DESIGNATION

Please enter my appearance as an Attorney/Agent for:

1. Applicant/Licensee Name:
2. License Number, if applicable:
3. Trade Name:
4. Establishment's Address:

The purpose of the Attorney/Agent Designation form is to represent the Applicant/Licensee for the following reason(s):

5. Filing an Application for a: **a. ☐ Manufacturer** **b. ☐ Wholesaler** **c. ☐ Retailer** **☐Class A ☐ Class B** **☐Class C ☐ Class D** **d. ☐ Caterer** **e. ☐ Entertainment Endorsement** **f. ☐ Tasting** **g. ☐ Sidewalk Café/Summer Garden** **h. ☐ Change of Hours** **i. ☐ Change of Officers** **j. ☐ Substantial Change** **k. ☐ Other: _____**	**6. ☐ Contested case(s) other than Protest Hearing. List case number below:** **7. ☐Protest Hearing**

8. Print Name:	
9. Address:	
10. Telephone Number:	**11. Email Address:**
_____ **12. Attorney/Agent Signature**	_____ **Date**

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FOR OFFICIAL USE ONLY OFFICE OF TAX & REVENUE (OTR)
_____ SIGNATURE
_____ DATE

BUSINESS ENTITY CLEAN HANDS CERTIFICATION

☐ **Seller** ☐ **Buyer**

A. License Number:	B. FEIN number:

PLEASE READ CAREFULLY AND COMPLETELY BEFORE SIGNING. A FALSE STATEMENT ON THIS CERTIFICATION REQUIRES THAT THE ADMINISTRATION PROCEED IMMEDIATELY TO REVOKE THE LICENSE OR PERMIT FOR WHICH YOU ARE NOW APPLYING, AND FINE YOU $1,000.00 (ONE THOUSAND DOLLARS). THIS CERTIFICATION IS REQUIRED BY THE CLEAN HANDS ACT OF 1996; EFFECTIVE MAY 11, 1996, (D.C. LAW 11-118, D.C. OFFICIAL CODE SEC. 47-2861 *et seq.*) **BEFORE YOU ARE ELIGIBLE TO RECEIVE A LICENSE OR PERMIT.**

I/We certify that the entity does not owe more than $100.00 to the District of Columbia Government as a result of:

1. Fines, penalties or interest assessed pursuant to the Litter Control Administrative Act of 1985, effective March 25, 1986 (D.C. Law 6-100; D.C. Official Code Sec. 8-801 et seq.);
2. Fines, penalties or interest assessed pursuant to the illegal Dumping Enforcement Act of 1994, effective May 20, 1994 (D.C. Law 10-117; D.C. Official Code Sec. 8-901 *et seq.*);
3. Fines, penalties or interest assessed pursuant to the Department of Consumer & Regulatory Affairs Civil Infraction Act of 1985, effective October 5, 1985 (D.C. Law 6-42; D.C. Official Code Sec. 2-1801.01 *et seq*.); or
4. Past due taxes;
5. Past due District of Columbia Water and Sewer Authority Service Fees;
6. Traffic adjudication fines or penalties;
7. Parking fines or penalties assessed by other jurisdictions, provided, that a reciprocity agreement is in effect between the jurisdiction and the District;
8. Fines assessed to car dealers; and
9. Fines assessed pursuant to the Taxicab and Limousine Commission Establishment Amendment Act of 2004.

If applicant is a sole proprietor, the individual must sign, if Partnership, each partner must sign, if Corporation, President or Vice President must sign, if LLC, managing member must sign the below certification.

I/We understand that if I knowingly falsify this Certification, the Administration will move to revoke the license or permit for which I am applying, and fine me $1,000.00 (one thousand dollars). I/We further understand that the Administration may conduct an investigation to ascertain the veracity of this certification.
I/We understand that this Certification is now required as documentation to accompany my application for a license or permit, and that by completing this Certification, I am not guaranteed that my license or permit will be approved.

Print name	Print Title	Signature	Date signed

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FOR OFFICIAL USE ONLY
OFFICE OF TAX & REVENUE (OTR)
_____ SIGNATURE
_____ DATE

ALL INDIVIDUALS THAT HAVE AN OWNERSHIP INTEREST MUST COMPLETE THIS FORM.
PLEASE READ CAREFULLY AND COMPLETELY BEFORE SIGNING. A FALSE STATEMENT ON THIS CERTIFICATION REQUIRES THAT THE ADMINISTRATION PROCEED IMMEDIATELY TO REVOKE THE LICENSE OR PERMIT FOR WHICH YOU ARE NOW APPLYING, AND FINE YOU $1,000.00. THIS CERTIFICATION IS REQUIRED BY THE CLEAN HANDS ACT OF 1996; EFFECTIVE MAY 11, 1996, (D.C. LAW 11-118, D.C. OFFICIAL CODE SEC. 47-2861 *et seq.*) BEFORE YOU ARE ELIGIBLE TO RECEIVE A LICENSE OR PERMIT.

I, _____, as _____,
(Name – Print or Type) (Applicant's Title)

certify that _____, social security number _____
(Home Address)

as of this date_____, does not owe more than $100.00 to the District of Columbia Government as a result of:

1. Fines, penalties or interest assessed pursuant to the Litter Control Administrative Act of 1985, effective March 25, 1986 (D.C. Law 6-100; D.C. Official Code Sec. 8-801 *et seq.);*
2. Fines, penalties or interest assessed pursuant to the illegal Dumping Enforcement Act of 1994, effective May 20, 1994 (D.C. Law 10-117; D.C. Official Code Sec. 8-901 *et seq.*);
3. Fines, penalties or interest assessed pursuant to the Department of Consumer & Regulatory Affairs Civil Infraction Act of 1985, effective October 5, 1985 (D.C. Law 6-42; D.C. Official Code Sec. 2-1801.01 *et seq.*); or
4. Past due taxes;
5. Past due District of Columbia Water and Sewer Authority Service Fees;
6. Traffic adjudication fines or penalties;
7. Parking fines or penalties assessed by other jurisdictions, provided, that a reciprocity agreement is in effect between the jurisdiction and the District;
8. Fines assessed to car dealers; and
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I understand that this Certification is required as documentation to accompany my application for a license or permit, and that by completing this Certification, I am not guaranteed that my license or permit will be approved.

_____	_____
Signature	**Print Name/Title**
_____	_____
ABC Application Number	**ABC License Number**

In order to report fraud, waste, and abuse in the District of Columbia government, call 1-800-521-1638.

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