Print Form

The Commonwealth of Massachusetts
Alcoholic Beverages Control Commission
239 Causeway Street
Boston, MA 02114
www.mass.gov/abcc

RETAIL ALCOHOLIC BEVERAGES LICENSE APPLICATION MONETARY TRANSMITTAL FORM

APPLICATION SHOULD BE COMPLETED ON-LINE, PRINTED, SIGNED, AND SUBMITTED TO THE LOCAL LICENSING AUTHORITY.

REVENUE CODE: RETA

CHECK PAYABLE TO ABCC OR COMMONWEALTH OF MA: $200.00

(CHECK MUST DENOTE THE NAME OF THE LICENSEE CORPORATION, LLC, PARTNERSHIP, OR INDIVIDUAL)

CHECK NUMBER

IF USED EPAY, CONFIRMATION NUMBER:

A.B.C.C. LICENSE NUMBER (IF AN EXISTING LICENSEE, CAN BE OBTAINED FROM THE CITY):

LICENSEE NAME:

ADDRESS:

CITY/TOWN: STATE ZIP CODE

TRANSACTION TYPE (Please check all relevant transactions):

- ☐ New License
- ☐ Transfer of License
- ☐ Change of Manager
- ☐ Cordials/Liqueurs Permit
- ☐ 6-Day to 7-Day License
- ☐ New Officer/Director
- ☐ Change of Location
- ☒ Alteration of Licensed Premises
- ☐ New Stockholder
- ☐ Management/Operating Agreement
- ☐ Pledge of License
- ☐ Pledge of Stock
- ☐ Transfer of Stock
- ☐ Issuance of Stock
- ☐ Wine & Malt to All Alcohol
- ☐ Change Corporate Name
- ☐ Seasonal to Annual
- ☐ Change of License Type
- ☐ Other

THE LOCAL LICENSING AUTHORITY MUST MAIL THIS TRANSMITTAL FORM ALONG WITH THE CHECK, COMPLETED APPLICATION, AND SUPPORTING DOCUMENTS TO:

ALCOHOLIC BEVERAGES CONTROL COMMISSION
P. O. BOX 3396
BOSTON, MA 02241-3396

The Commonwealth of Massachusetts
Alcoholic Beverages Control Commission
239 Causeway Street
Boston, MA 02114
www.mass.gov/abcc

PETITION FOR CHANGE OF LICENSE

ABCC License Number

City/Town

The licensee respectfully petitions the Licensing Authorities to approve the following transactions:

- ☐ Change of Manager
- ☐ Pledge of License/Stock
- ☐ Change of Corporate Name/DBA
- ☐ Change of License Type (§12 ONLY, e.g. "club" to "restaurant")
- ☒ Alteration of Premises
- ☐ Cordial & Liqueurs
- ☐ Change of Location

☐ Change of Manager

Last-Approved Manager:

Requested New Manager:

☐ Pledge of License /Stock

Loan Principal Amount: $ Interest Rate:

Payment Term: Lender:

☐ Change of Corporate Name/DBA

Last-Approved Corporate Name/DBA:

Requested New Corporate Name/DBA:

☐ Change of License Type

Last-Approved License Type:

Requested New License Type:

☒ Alteration of Premises: (must fill out financial information form)

Description of Alteration:

☐ Change of Location: (must fill out financial information form)

Last-Approved Location:

Requested New Location:

Signature of Licensee

(If a Corporation/LLC, by its authorized representative)

Date Signed

Financial Information:

Costs Associated with License

1. Real Property:	$
2. Business Purchase:	$
3. Renovations/Construction:	$
4. Start up/Operating Capital:	$
5. Inventory:	$
6. Goodwill:	$
7. Furniture:	$
8. TOTAL COST:	$
9. TOTAL CASH:	$
10. TOTAL FINANCED:	$

The amounts in items 9 and 10 must total the amount reflected in item 8. **IMPORTANT:** Submit any and all records, documents and affidavits including loan agreements that explain the sources of money for this transaction.

AFFIDAVIT OF NOTICE OF MAILING TO ABUTTER AND OTHERS

To the Licensing Board

For the _____ Date _____

I, _____ hereby certify that the following is a true list of the persons shown upon the Assessor's most recent valuation list as the owners of the property abutting the proposed location for an alcoholic beverages license at: _____

And that the following schools, churches or hospitals are located within the radius of five hundred (500) feet from said proposed location:

_____ _____

_____ _____

_____ _____

If there are none, please so state: _____

I also certify that the notice of this application/petition concerning an alcoholic beverages license was given to the above by mailing to each of them within three (3) days after publication of same, a copy of the advertisement is attached below. Also attached are the registered receipts./return registered receipts bearing signatures of persons receiving said notice.

Signed and subscribed to under the penalties of perjuries:

Printed: _____

Written: _____

Date: _____

Notary Public: _____

My Commission Expires: _____

Please Attach Advertisement and Receipts

Additional Space

Please note which question you are using this space for.

Alteration of Premises Checklist

This application will be returned if the following documentation is not submitted**:**

- ☐ Retail Transmittal Form
- ☐ $200.00 Fee made payable to the Commonwealth of Massachusetts or the ABCC
- ☐ Newspaper Notice
- ☐ Abutter Notification
- ☐ Petition for Change of License
- ☐ Floor Plan
- ☐ Signed lease or documents proving a legal right to occupy premises (if needed)
- ☐ All records, loan agreements, documents, as well as affidavits detailing the source(s) of money for this license transaction
- ☐ Supporting Financial Records (if needed)
- ☐ 3 Months worth of bank statements confirming the sources of funds
- ☐ Vote of Corporate Board or LLC
- ☐ Completed Financial Information