

**LEGAL NOTICE**  
**FORMAT FOR PUBLICATION OF TRANSFER APPLICATION**

*Check Applicable Phrases*

I, \_\_\_\_\_  
*(Sole Owner's Name)*

We, the partners of \_\_\_\_\_  
*(Partnership Name)*

We, the officers of \_\_\_\_\_  
*(Corporation Name)*

I/We, the member(s) of \_\_\_\_\_  
*(Limited Liability Company Name)*

I, the trustee of \_\_\_\_\_  
*(Name of Trust)*

intend to make application for a transfer of:

- a Manufacturer Class I, Distiller &/or/ Rectifier permit
- a Manufacturer Class II, Wine permit
- a Manufacturer Class III, Native Wine permit
- a Package Retailer permit
- an On-Premise Retailer permit
- an On-Premise Retailer, Club permit
- an On-Premise Retailer, Wine only permit
- a Common Carrier permit
- a Native Wine Retailer permit
- a Caterer's permit, for on-premise retailer permit holders
- a Caterer's permit
- a Solicitor's permit
- a Research permit

As provided for by the Local Option Alcoholic Beverage Control Laws, Section 67-1-1, et seq., of the Mississippi Code of 1972, Annotated. If granted a transfer from \_\_\_\_\_  
*(Name of sole owner, partnership, corporation, limited liability company or trust)*

doing business as \_\_\_\_\_

who is operating at \_\_\_\_\_  
*(Street) (City) (County)*

I/We propose to operate under the tradename of \_\_\_\_\_

Located at \_\_\_\_\_  
*(Street) (City) (County)*

The name(s), title(s) and address(es) of the owner(s)/partners/corporate officer(s) and/or majority stockholder(s)/ member(s)/ trustee of the above named business are:

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If any person wishes to request a hearing to object to the issuance of this permit, a request for a hearing must be made in writing and received by the Department of Revenue within (15) fifteen days from the first date this notice was published.

Requests shall be sent to:

Chief Counsel, Legal Division  
Department of Revenue  
P. O. Box 22828  
Jackson, MS 39225

Date of First Publication: \_\_\_\_\_

This the \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.