# APPLICATION, CHANGE IN LOCATION OF ABC PERMITTED BUSINESS



RETURN TO
ALCOHOLIC BEVERAGE CONTROL
PERMIT DEPARTMENT
P.O. BOX 22828
JACKSON, MS 39225

### **APPLICATION INSTRUCTIONS**

Please read these instructions carefully prior to completing this application for transfer in location of your permit.

The permit fee for this transfer is a non-refundable \$25.00. If you currently must pay for your alcoholic beverage orders by certified funds, then you must submit certified funds for payment of this fee. All transfers in location must be approved by the Department before the move is actually made. This application may only be used if you are moving your business to a new location inside the same municipality. If you are moving to a new municipality, you must make application for a new permit.

In addition to completing this application, we need the following information:

- A) floor plan of your new location
- B) a copy of your new lease or deed
- C) Proof of Publication Publisher's Affidavit
- D) Proof that you have filed an updated sales tax registration, form 70-001 with the Department of Revenue to report the change in location.

Please review your application to be sure that you have completed it properly. Return your application to:

ALCOHOLIC BEVERAGE CONTROL PERMIT DEPARTMENT P.O. BOX 22828 JACKSON, MS 39225

PLEASE ALLOW AMPLE TIME FOR PROCESSING

If you need assistance, call ABC Permit Department at (601) 923-7690.

<b>PERMIT DEPT. USE</b>	ONLY
AMT. OF CHECK	
CHECK NUMBER	
PERMIT NUMBER	

## APPLICATION FOR CHANGE IN LOCATION OF ALCOHOLIC BEVERAGE RETAILER'S PERMIT

I,	doing business		ng business as
ABC I	Permit Noand located at(street)		
subm	(street)  nit an application for a change in location to:	(city)	(county)
		(street)	
	(county)		
Telep	phone Numbers: (business)	(home)	
I.	Does applicant, have or has the applicant alcoholic beverage retailer's permit?		
II.	Is the applicant indebted to the State of Mississippi for any taxes, fees o payment of penalties imposed by law or by any rule or regulation of the Department? If "yes" explain fully:		
III.	List your Mississippi Sales Tax Number:		
IV.	List your Federal Identification Number (EIN)		
V.	Have you filed an updated sales tax re Department of Revenue to report the change		

## PERMITTEE CERTIFICATION AND OATH \_\_\_\_\_\_, certify under penalty of perjury that the organization I, \_\_\_\_\_\_\_, certify under penalty of perjury that the organization applying for this Alcoholic Beverage Retailer's Permit does meet the qualifications of a permittee as described in Sections 67-1-5, 67-1-51, 67-1-55, and 67-1-69, of the Mississippi Code of 1972, Annotated. I affirm that this organization will comply fully with the provisions of the Local Option Alcoholic Beverage Control Laws, Rules and Regulations in the purchase, sale, and handling of alcoholic beverages and will keep all records and make all reports and remittances as required hereby. I certify that the information presented on this application to be true and correct, to the best of my knowledge and belief. I also agree that making a material misrepresentation on this application shall be evidence of a lack of trustworthiness as contemplated by MS Code Ann. Section 67-1-57 and provide a basis for denial on this application. (applicant's signature) Date:\_\_\_\_\_ (title) SWORN TO AND SUBSCRIBED before me, this the \_\_\_\_\_day of \_\_\_\_\_\_, \_\_\_\_\_, \_\_\_\_\_, Notary Public

My Commission Expires:

## LEGAL NOTICE FORMAT FOR PUBLICATION OF A CHANGE IN LOCATION

( )	$I_{r_{-}}$
. ,	(sole owner's name)
( )	I, the trustee for(name of trust)
( )	We, the partners of
	(partnership name)
( )	We, the officers of
( )	(corporate name) We, the members of
( )	(limited liability company name)
( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) ( ) Under	to make application for a change in location of: a Mfr's permit Class I, distiller's &/or rectifier's permit a Mfr's permit Class III, wine manufacturer's permit a Mfr's permit Class III, native wine manufacturer's permit a Native wine retailer's permit a Package retailer's permit an On-premise retailer's permit for wine only an On-premise retailer's permit for clubs a Common Carrier permit a Caterer's permit, for on-premise retailer permit holders a Caterer's permit a Solicitor's permit a Research permit an Alcohol processor permit the provisions of the Local Option Alcoholic Beverage Control Laws 67-1-1 et. Mississispipi Code of 1972. If granted a change from
	(name of corporation, trust, Ilc, partnership, or sole owner)
doing	business as, who is now operating at
	(current business address)
(I)	, propose to operate under the tradename of
at	of
The	eet number) (street) (county) name(s), title(s), and address(es) of the owner(s)/(partner(s)/corporate (s)/member(s) and/or majority stockholder(s) of the above names business are

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

shall be sent to: Chief Counsel, Legal		
Department of Revenue P. O. Box 22828 Jackson, MS 39225 Date of First Publication: / /		
This the	_day of	

#### NOTICE

Your permit & packet will be mailed immediately after approval. If you elect to pick up your permit at the Liquor Distribution Center, call the Permit Department at 601-923-7690 to make prior arrangements.

### **APPLICATION CHECK LIST**

Have you:

Included the correct permit fee?

Included a copy of your new floor plan?

Included a copy of your new lease or deed?

Included Proof of Publication of your legal notice?

Completed your application, signed and had notarized?

Filed an updated sales tax registration Form 70-001 with the Department of Revenue to report the change in location?