STATE OF NEW YORK - LIQUOR AUTHORITY

ATTN: Refund Unit 80 South Swan Street, Suite 900 Albany, NY 12210-8002

If the licensee desires to surrender a license or permit voluntarily for cancellation and refund, if any, before the expiration date, as provided in Section 127 of the Alcoholic Beverage Control Law, fill in and sign the following petition and send to the State Liquor Authority address listed above., together with the license or permit certificate. Any false statements may subject the licensee or permittee to disciplinary proceedings and void any request for refund.

NOTE: No refund is payable unless this form is completed and the Federal Employer Identification Number (FEIN) of the licensed entity has been provided.

	URRENDER OF LICENSE
Beverage Control Law, to accept voluntary surrender of license (permit) ce	
and in support of th	is petition makes the following statements and answers:
(Name of licensee)	YES or NO
1. Has the licensee or (if a partnership) any of the partners or (if a corporation arrested or indicted or served with a summons for any crime or offense (exadministrative Code) in the past 12 months?	
2. Has any person other than reported in Question 1 above been arrested or offense committed on the licensed premises or which involved the license Code) in the past 12 months?	
(If answer to either 1 or 2 above is "Yes", attach an affidavit setting forth disposition of the case.)	in each case the date thereof, crime or offense involved, the name of the defendant and
3. The undersigned petitioner further states that the said licensee will, upon said license was issued and thereafter until a new license shall be issued to	the surrender of said license, cease to traffic in alcoholic beverages during the term for which o said licensee.
WHEREFORE, the undersigned petitioner asks that said license be cancelled and a r	refund made as provided in Section 127 of the Alcoholic Beverage Control Law.
Individual and/or Partnerships complete both Sections (A)	Corporations complete both Sections (B)
(A) Individual licensee and each member of a partnership sign here and sign appropriate certification below.	(B) If a Corporation, sign here and sign appropriate certification below.
Dated	Dated
	Name of Corporation:
	Ву:
(A) CERTIFICATION TO BE SIGNED AND DATED B	BY INDIVIDUAL AND EACH MEMBER OF PARTNERSHIP
The undersigned each for himself/herself certifies that he/she is the holder of the aform and the statements contained therein, and the same are true of his/her own knowledge.	resaid license; that he/she made the foregoing petition; that he/she knows the contents thereof e.
,	
Dated	
(Signature) of person(s) signing petition)	(Present residence address)
of	
of	
of	
(B) CERTIFICATION TO BE SIGN	NED AND DATED BY A <u>CORPORATION</u>
certifies that	he/she is
(Name)	he/she is (Title)
of the Corporation which his/hor name therete by order of the Board of Directors of said Corporation; that he/h	ch is holder of this license and which made and executed this petition; that he/she signed she knows the contents thereof and the statements contained therein; and the same are true of
his/her own knowledge.	she knows the contents thereof and the statements contained therein, and the same are true of
Dated	
of	,
(Signature of officer signing petition)	(Present residence address)
Date of Surrender FEIN	No
License Serial No.	
Please specify the address where the refund, if any, is to be mailed :	

SLA Form 225-008 (01/28/2011)