

Location Packet for Reporting Changes for Retailers

L-LRC (6/2012)

The Location Packet for Reporting Changes for Retailers is to be used to report any changes to your current location or reinstate. You must complete this packet for any changes you are reporting. If you have a change of location address, or reinstatement, you will need to complete this entire packet and the Prequalification Packet for Location Address Change/Reinstatement.

If adding a subordinate permit/license please submit correct fees. See fee chart on www.tabc.state.tx.us. 1. Current License/Permit No. 2. Trade Name of Location as on Current License/Permit 3. Location Address as on Current License/Permit 4. Owner of Business as on Current License/Permit **5.** Federal Employer Identification No. (FEIN) INITIAL INFORMATION 6. Have there been any changes in the ownership or structure of the business since the last application was filed? Yes No If "YES," complete the Business Packet for Reporting Changes (L-BRC). INDICATE ALL CHANGES YOU ARE REPORTING WITH THIS APPLICATION Please mark all that apply. For new location address, or reinstatement, you MUST complete this entire packet. All other changes complete only the section that applies, and then proceed to the Warning and Signature section. If adding a Local Cartage Permit (E) attach Local Cartage (L-E). Only update information you want changed. 7. New Trade Name of Location City **8.** New Mailing Address State Zip Code Add Subordinate 9. **PE** Beverage Cartage Permit LP Local Distributor's Permit **CB** Caterer's Permit **PS** Package Store Tasting Permit **FB** Food and Beverage Certificate **MI** Minibar Permit ■ E Local Cartage Permit **BP** Brewpub License **10.** New Location Address as on your Prequalification Packet for Location Address Change/Reinstatement **11.** Reinstatement Address as on your Prequalification Packet for Location Address Change/Reinstatement

LOCATION ADDRESS SALES INFORMATION
12. Provide the sales data for the last year of operation or projected annual sales at the proposed licensed premises:
Alcoholic Beverage Sales \$
Food Sales \$
Other Sales \$
Total Sales \$
13. Is the proposed location in a hotel or motel? Yes No
14. Will the license or permit embrace the entire building and grounds at the address shown? Yes No
If "NO," attach the required diagram.
LOCATION ADDRESS INFORMATION FOR OWNERSHIP/LEASE/SUBLEASE/MANAGEMENT INFORMATION
15. Does the applicant own the land and building at this proposed licensed location? Yes No If "NO," please complete Owner of Property (L-OP) and attach copy of your lease. NOTE: Be prepared to provide additional information (such as a copy of your lease) if requested.
16. If operating under a lease at this location, indicate:
Expiration date(s)/Options
Monthly rental amount \$
Other fees and payments to landlord
17. Are you operating under any concession, service or management agreement(s) that contain terms for services or management beyond property rental? Yes No If "YES," complete Sublessor (L-SL), indicate the following, and attach copy of agreement(s):
Expiration date(s)/Options
Monthly fee \$\frac{\\$}{If you have a sublessor that differs from the management company enter sublessor name below and complete Form L-SL.
Sublessor Name
18. Are there any agreements, excluding the above, which require payment by the applicant in a dollar figure or percentage of gross or net income of the business? Yes No If "YES," attach a copy of agreement.
19. Do you share the premises with another business entity? ☐ Yes ☐ No If "YES," indicate the tradename(s) of business(es) and sales and use tax number(s) for other business(es):
Trade Name
Sales & Use Tax Number
20. Do you or anyone else at the location operate under a franchise agreement? Yes No If "YES," you MUST have exclusive control of all phases of the purchase, sale, and service of alcoholic beverages.

LOCATION ADDRESS FINANCE INFORMATION

- 21. What is the amount of total investment from all sources for this location? \$

 Please be prepared to provide copies of all documents related to the financing of this location.
- **22.** List any person, firm, or corporation that has advanced or will advance any money, that holds any mortgage or encumbrances against the assets of the proposed business location, or that has signed or co-signed, guaranteed or financially assisted this business location for which you are seeking a license/permit. If a partnership or corporation, list entity along with partners/officers.

(If more space is needed, attach additional page.)

SSN or FEIN	Issuing State/DL No.	Date of Birth	(mm/dd/yyyy)	Amount
		/	/	\$
Name, Corporation, Partner/Officer		Terms		
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Name, Corporation, Partner/Officer		Terms		•

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23. Making measurements from	N ADDRESS MEASUREMEN	INFURIMATION				
23. Making measurements from the door where the public enters your establishment to the nearest property						
· ·	I, will this location be within 1,000 feet	of a private/public school?				
Yes No						
this application.	e of this application to the school offic	lais and attach a copy of the notice to				
	remines within 200 feet of a vestido atial					
association? The Yes No	remises within 300 feet of a residential	address or established neighborhood				
If "YES," and if you are applying for an On-Premise License/Permit, and if a Food and Beverage						
Certificate is not applied for, notify each residential address and established neighborhood association.						
Attach a list of all addresses notified with a copy of the completed notice.						
NOTE: Sample notice is located in the Application Guidelines.						
	ON-PREMISE LICENSES AND PERMI	TS ONLY				
	TION FOR APPLICANTS IN MUNICIF R MORE ACCORDING TO THE LAST					
•		chool, day care or social service facility				
	line from the nearest point of the prope					
	line of any of these facilities? Yes					
	f the applicant's actual or anticipated g	ross revenue from the sale of alcoholic				
beverages? Yes No	ave are "VEC " have very patitied all to	and the second s				
	ove are "YES," have you notified all te plication that an application has been f					
days of filling the original ap	· · · · · · · · · · · · · · · · · · ·	CG 140				
WARNING AND	If Applicant Is/Must Sign Individual/Individual Owner	Corporation/Officer				
SIGNATURE	Partnership/Partner Limited Partnership/General Partner	Limited Liability Company/ Officer or Manager				
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EACH LICENSEE OR PERMITTEE SHALL HAVE EXCLUSIVE OCCUPANCY AND CONTROL OF THE ENTIRE LICENSED LOCATION WITH RESPECT TO SALE OF ALCOHOLIC BEVERAGES. ANY						
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