

CSR:
Amount:



RESTRUCTURE

Arizona Dept. of Liquor Licenses and Control
 800 W. Washington St. 5th Floor Phoenix, AZ 85007
 (602) 542-5141

DLLC USE ONLY	
Job #:	_____
Date Accepted:	_____
CSR:	_____

Type or Print with Black Ink

The Restructure application fee is \$100.00, except where a licensee holds multiple licenses and requests simultaneous changes, then the fee is \$100.00 for the first application and \$50.00 each for the remaining licenses not to exceed \$1000.00

License #: _____

Agent Name: _____

Current Licensee (Legal Entity): _____ **Current** AZCC File # _____

New Licensee (Legal Entity): _____ **New** AZCC File # _____

Premises Name (DBA): _____

Premises Address: _____

Premises Phone #: _____ Daytime Contact/Cell#: _____

Mailing Address: _____

Email Address: _____

CURRENT OWNERSHIP	NEW OWNERSHIP
<input type="checkbox"/> J.T.W.R.O.S	<input type="checkbox"/> J.T.W.R.O.S
<input type="checkbox"/> Partnership	<input type="checkbox"/> Partnership
<input type="checkbox"/> Corporation	<input type="checkbox"/> Corporation
<input type="checkbox"/> Limited Liability Company	<input type="checkbox"/> Limited Liability Company
<input type="checkbox"/> Management Company	<input type="checkbox"/> Management Company
<input type="checkbox"/> Tribe	<input type="checkbox"/> Tribe
<input type="checkbox"/> Trust	<input type="checkbox"/> Trust
<input type="checkbox"/> Other (Explain) _____	<input type="checkbox"/> Other (Explain) _____

Declaration:

I, (Print Name) _____, declare under penalty of perjury that I am authorized by the licensee to submit this application. I have read the contents of this application, and to the best of my knowledge believe all statements made on this application to be true, correct and complete.

Signature

Restructure qualifications: There is no change in control or beneficial ownership; all of the controlling persons of the licensee and the new the business entity are identical.