Print Form

ABCC LICENSE #: C

Certificate of Compliance Renewal 2012

1. Shipment Origin:

State below the location of the premises **from** which alcoholic beverages are to be shipped to Massachusetts licensed Wholesalers and Importers. Each shipping location requires an application.

Name	Address	Telephone

2. Required License(s):

List the license(s) you hold which authorize the exportation or sale of alcoholic beverages from the location identified in Question 2 above to licensees in this Commonwealth and the Licensing Authority, which issued said license (must correspond with above if licensing is mandatory by said State or Foreign Country).

License Name	State Licensing Authority

3. F.D.A. Compliance:

Have you registered with the Food and Drug Administration? Yes ☐ No ☐ Registration Date

4. Cross-Ownership:

Do you or any member of your immediate family or does the Corporation or Partnership that you or any member of your immediate family belong to, own directly or indirectly 10% or more of any financial and/or beneficial interest of any Massachusetts License?

Yes ☐ No ☐

(**Note**: Chapter 138, §18B defines immediate family as "the certificate holder and his/her spouse and their parents, children, brothers and sisters").

If YES, list below the name of the individual, title and name of the Massachusetts licensee

NAME OF INDIVIDUAL	TITLE	NAME OF MASSACHUSETTS LICENSEE

If additional space is needed, please use last page

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5. Brokers Information:

List any person or entity representing you as an agent, broker or solicitor in Massachusetts:

NAME	ADDRESS	TELEPHONE

If additional space is needed, please use last page

6. Wholesaler(s) Information:

List Massachusetts Wholesaler(s) who are distributing your products and the products each distributes:

WHOLESALER	PRODUCTS

If additional space is needed, please use last page

Pursuant to M.G.L. Ch. 62C, Sec. 49A, I certify under the penalties of perjury that, I have filed all state tax returns and paid all state taxes required under law. I further understand that each representation in this application is material to the determination of the application and state under penalty of perjury that all statements and representations therein are true.

Signature

Date

Title

Additional Space

Please note which question you are using this space for.