The Commonwealth of Massachusetts
Alcoholic Beverages Control Commission
239 Causeway Street
Boston, MA 02114
www.mass.gov/abcc

APPLICATION FOR MULTIPLE AMENDMENTS

Below you will find a step-by-step explanation of the application process. **Please read this entire page before you apply for amendment(s) to your retail license as it provides critical information on the license approval process.**

The ABCC urges you to reach out to the Local Licensing Authority ("LLA") in the city or town in which you are applying for a license **before applying for amendment(s) to your retail license**. While state law requires you to submit certain documents, your LLA may have other documents and/or fees required of you before it will consider your application, and failure to contact them before you apply for a license may delay the consideration of your application.

The granting of a retail license involves a three-step process under M.G.L. c. 138, §§ 15A & 16B:

1. Step One is the granting of an application by the LLA;
2. Step Two is approval by the ABCC;
3. Step Three is the issuance of the retail license by the LLA.

Each step has certain legal requirements:

Step One. In Step One, when you submit your application with the LLA, the LLA is required by law to note the date and hour your application is filed with it. Then, they must publish an advertisement noticing a public hearing on your application, if their regulations require, within 10 days of your application being filed. Then, no sooner than 10 days after advertising the hearing, the hearing will be held. The LLA must act on an application within 30 days of it being filed.

If the LLA grants the license, the application shall be forwarded to the ABCC no later than 3 days following such approval.

Step Two. In Step Two, when the ABCC receives an application that has been approved by the LLA, an investigator will be assigned. The investigator will investigate the proposed licensed premises, if required, as well as the proposed applicant, manager, or other amendments and the source(s) of financing for the transaction. Parties to an application must respond promptly to investigators' inquiries. **Failure to do so will result in a delay of the approval and may result in a denial of the application.**

Some amendment transactions are forwarded to the Department of Revenue ("DOR") and the Division of Unemployment Assistance ("DUA"). Both agencies will research the issue of any outstanding tax obligations of the licensee for all types of taxes, including sales, meals, withholding, corporate excise, room occupancy, personal income taxes, unemployment insurance, and employer fair share contributions. The ABCC will not approve certain license amendments until DOR and DUA attest that the party has no outstanding tax liabilities to the Commonwealth. The licensee is responsible for resolving all tax questions.

Step Three. Once the LLA receives the ABCC's approval of an application, it must issue the license within 7 days.

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The following documentation is required as a part of your retail license amendment application.
ABCC investigators reserve the right to request additional documents as a part of their investigation.

ALL AMENDMENTS REQUIRE

- ☐ Monetary Transmittal Form with $200 fee
  You can PAY ONLINE or include a $200 check made out to the ABCC
- ☐ Amendment Application (this packet)
- ☐ Vote of the Corporate Board
  A corporate vote authorizing all amendments being applied for, signed by an authorized signatory for the licensed entity
- ☐ Additional Documents Required by the Local Licensing Authority

ADDITIONAL REQUIRED DOCUMENTS

CHANGE OF MANAGER

- ☐ CORI Authorization Form
  This form must be notarized with a stamp*
- ☐ Proof of Citizenship for proposed manager of record
  Passport, US Birth Certificate, Naturalization Papers, Voter Registration

ALTERATION OF PREMISES / CHANGE OF LOCATION

- ☐ Supporting Financial Documents
  Documentation supporting any loans or financing, if applicable
- ☐ Floor Plan
  Detailed Floor Plan showing square footage, entrances and exits and rooms
- ☐ Lease
  Signed by licensee and landlord.

CHANGE OF BENEFICIAL INTEREST / TRANSFER OR ISSUANCE OF STOCK

- ☐ Beneficial Interest - Individual Form
  For any individual with direct or indirect interest in the licensee
- ☐ Beneficial Interest - Organization Form
  For any organization with direct or indirect interest in the licensee
- ☐ CORI Authorization Form
  For any individual with direct or indirect interest in the licensee.
  This form must be notarized with a stamp*
- ☐ Business Structure Documents
  If Proposed Licensee is applying as:
  - A Corporation or LLC - **Articles of Organization** from the Secretary of the Commonwealth
  - A Partnership - **Partnership Agreement**
  - Sole Proprietor - **Business Certificate**

PLEDGE OF COLLATERAL

- ☐ Signed Promissory Note
- ☐ Signed Pledge Documentation

CHANGE OF CORPORATE NAME

- ☐ Business Structure Documents
  If Proposed Licensee is applying as:
  - A Corporation or LLC - **Articles of Organization** from the Secretary of the Commonwealth
  - A Partnership - **Partnership Agreement**
  - Sole Proprietor - **Business Certificate**

CHANGE OF DBA

- ☐ Business Certificate

CHANGE OF CORPORATE STRUCTURE

- ☐ Business Structure Documents
  If Proposed Licensee is applying as:
  - A Corporation or LLC - **Articles of Organization** from the Secretary of the Commonwealth
  - A Partnership - **Partnership Agreement**
  - Sole Proprietor - **Business Certificate**

CHANGE OF CATEGORY, CLASS, TYPE

No additional requirements

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APPLICATION FOR MULTIPLE AMENDMENTS

Please complete Name of Licensee and Application Contact sections completely, leaving no fields blank.

NAME OF LICENSEE (Business Contact)

ABCC License Number

City/Town of Licensee

APPLICATION CONTACT

The application contact is required and is the person who will be contacted with any questions regarding this application.

First Name: Middle: Last Name:

Title: Primary Phone:

Email:

AMENDMENT OPTIONS

Please check off all of the amendments for which you are applying below. You will only be required to complete the sections of this amendment application that correspond to the amendments you check. Next to each amendment is the page that you will find the necessary application questions to complete. Please see the instructions page for additional required documents based on transaction.

If there are ANY financial considerations for the transactions for which you are applying, you must complete the financial section on page 2 of this application.

- ☐ Change in Business Contact Information - Page 2

  This is only to change a mailing or business address (corporate headquarters, NOT premises address), phone number or email.

- ☐ Change of Manager - Page 3
- ☐ Alteration of Premises / Change of Location - Page 4
- ☐ Change of Beneficial Interest / Transfer or Issuance of Stock - Page 5
- ☐ Pledge of Collateral (License, Inventory, Beneficial Interest) - Page 6
- ☐ Change of Corporate Name - Page 6
- ☐ Change of DBA - Page 6
- ☐ Change of Corporate Structure (i.e. Corporation to LLC, Sole Proprietor to LLC) - Page 6
- ☐ Change of Category (i.e. Wine and Malts to All Alcohol) - Page 6
- ☐ Change of Class (i.e. Seasonal to Annual) - Page 6
- ☐ Change of Type (i.e. Restaurant to General on Premises) - Page 6

FINANCIAL INFORMATION

Complete this section if there are financial consideration for **any** of the amendments for which you are applying.

Associated Costs

A. Purchase Price for Building/Land	
B. Purchase Price for any Business Assets	
C. Costs of Renovations/Construction	
D. Purchase Price of Inventory	
E. Initial Start-Up Costs	
F. Other (Please specify)	
G. Total Cost (Add lines A-F)	

Please note, the total amount of **Cash Investment** (top right table) plus the total amount of **Financing** (bottom right table) must be equal to or greater than the **Total Cost** (line G above).

You are required to provide all documents relating to financing and/ or loans you receive for this transaction

Please provide information about the sources of cash and/or financing for this transaction

Source of Cash Investment

Name of Contributor	Amount of Contribution
Total:	

Source of Financing

Name of Lender	Amount	Does the lender hold an interest in any MA alcoholic beverages licenses?	If yes, please provide ABCC license number of lender
		Total:	

BUSINESS CONTACT

Complete this section ONLY if there are changes to the Licensee phone number, business address (corporate headquarters), or mailing address. If you are changing your premises location, you must also complete the premises section on page 4.

Primary Phone: Fax Number:

Alternative Phone: Email:

Business Address (Corporate Headquarters)

Street Number: Street Name:

City/Town: State:

Zip Code: Country:

Mailing Address

☐ *Check here if your Mailing Address is the same as your Business Address*

Street Number: Street Name:

City/Town: State:

Zip Code: Country:

MANAGER CONTACT

Complete this section if you are requesting a change of manager.

The Manager Contact is the individual who will have day-to-day, operational control over the liquor license.

Salutation ____ First Name ____ Middle Name ____ Last Name ____ Suffix ____

Social Security Number ____ Date of Birth ____

Primary Phone: ____ Email: ____

Mobile Phone: ____ Place of Employment ____

Alternative Phone: ____ Fax Number ____

Citizenship / Residency / Background Information of Proposed Manager

Are you a U.S. Citizen? ◯ Yes ◯ No

Have you ever been convicted of a state, federal, or military crime? ◯ Yes ◯ No

If yes, attach an affidavit that lists your convictions with an explanation for each

Have you ever been Manager of Record of a license to sell alcoholic beverages? ◯ Yes ◯ No

If yes, please list the licenses for which you are the current or proposed manager: ____

Do you have direct, indirect, or financial interest in this license? ◯ Yes ◯ No

If yes, percentage of interest ____

If yes, please indicate type of Interest (check all that apply):

- ☐ Officer
- ☐ Stockholder
- ☐ LLC Member
- ☐ Partner
- ☐ Contractual
- ☐ Management Agreement
- ☐ Sole Proprietor
- ☐ LLC Manager
- ☐ Director
- ☐ Landlord
- ☐ Revenue Sharing
- ☐ Other

Please indicate how many hours per week you intend to be on the licensed premises ____

Employment Information of Proposed Manager

Please provide your employment history for the *past 10 years*

Date(s)	Position	Employer	Address	Phone

Prior Disciplinary Action of Proposed Manager

Have you ever been involved directly or indirectly in an alcoholic beverages license that was subject to disciplinary action? If yes, please complete the following:

Date of Action	Name of License	State	City	Reason for suspension, revocation or cancellation

PROPOSED MANAGER MUST COMPLETE A CORI REQUEST FORM

PREMISES INFORMATION

Please complete this section if you are altering your premises or changing your premises location.
Please enter the address where the alcoholic beverages are sold.

Premises Address

Street Number: Street Name: Unit:

City/Town: State: Zip Code:

Country:

Description of Premises

Please provide a complete description of the premises, including the number of floors, number of rooms on each floor, any outdoor areas to be included in the licensed area, and total square footage.

Floor Number	Square Footage	Number of Rooms

Patio/Deck/Outdoor Area Total Square Footage

Indoor Area Total Square Footage

Number of Entrances

Number of Exits

Proposed Seating Capacity

Proposed Occupancy

Occupancy of Premises

Please complete all fields in this section. Documentation showing proof of legal occupancy of the premises is required.

Please indicate by what right the applicant has to occupy the premises

Lease Beginning Term

Lease Ending Term

Rent per Month

Rent per Year

Landlord Name

Landlord Phone

Landlord Address

If leasing or renting the premises, a signed copy of the lease is required.

Please indicate if the terms of the lease include payments based on the sale of alcohol: Yes No

CHANGE IN BENEFICIAL INTEREST / TRANSFER or ISSUANCE OF STOCK

CURRENT OWNERSHIP (Before Change in Beneficial Interest)

Please list all individuals or entities with a direct or indirect, beneficial or financial interest in this license. This pertains to the current licensee (before change in beneficial interest occurs).

Name	Title / Position	% Owned	Other Beneficial Interest

PROPOSED OWNERSHIP (After Change in Beneficial Interest)

Please list all individuals or entities with a direct or indirect, beneficial or financial interest in this license.

An individual or entity has a direct beneficial interest in a license when the individual or entity owns or controls any part of the license. For example, if John Smith owns Smith LLC, a licensee, John Smith has a direct beneficial interest in the license.

An individual or entity has an indirect beneficial interest if the individual or entity has 1) any ownership interest in the license through an intermediary, no matter how removed from direct ownership, 2) any form of control over part of a license no matter how attenuated, or 3) otherwise benefits in any way from the license's operation. For Example, Jane Doe owns Doe Holding Company Inc., which is a shareholder of Doe LLC, the license holder. Jane Doe has an indirect interest in the license.

A. All individuals listed below are required to complete a Beneficial Interest Contact - Individual form.
B. All entities listed below are required to complete a Beneficial Interest Contact - Organization form.
C. Any individual with any ownership in this license and/or the proposed manager of record must complete a CORI Release Form.

Name	Title / Position	% Owned	Other Beneficial Interest

APPLICATION FOR MULTIPLE AMENDMENTS

AMENDMENT APPLICATION FOR:
Change of Corporate Name, Change of DBA, Change of Legal Structure, Change of Class, Change of Category

Please check the amendment that you are applying for and complete the corresponding section. Please refer to the requirements page for required documents.

PLEDGE INFORMATION

Are you seeking approval for a pledge? ◯ Yes ◯ No

Please indicate what you are seeking to pledge (check all that apply)

☐ License ☐ Stock / Beneficial Interest ☐ Inventory

To whom is the pledge is being made:

Does the lender have a beneficial interest in this license? ◯ Yes ◯ No

Does the lease require a pledge of this license? ◯ Yes ◯ No

☐ **Change of Corporate Name**

This is the License Entity Name or the Business Contact

Last-Approved Corporate Name:

Requested New Corporate Name:

☐ **Change of DBA**

Last-Approved DBA:

Requested New DBA:

☐ **Change of Corporate Structure**

LLC, Corporation, Sole Proprietor, etc

Last-Approved Corporate Structure

Requested New Corporate Structure

☐ **Change of License Category**

All Alcohol, Wine and Malt, Wine Malt and Cordials

Last-Approved License Category

Requested New License Category

☐ **Change of License Class**

Seasonal or Annual

Last-Approved License Class

Requested New License Class

☐ **Change of License Type***

i.e. Restaurant to Club
Package Store to Supermarket

CAN NOT change from an on-premise to an off-premises license type.

Last-Approved License Type

Requested New License Type

ADDITIONAL SPACE

The following space is for any additional information you wish to supply or to clarify an answer you supplied in the application.

If referrencing the application, please be sure to include the number of the question to which you are referring.

APPLICANT'S STATEMENT

I, _____ the: ☐ sole proprietor; ☐ partner; ☐ corporate principal; ☐ LLC/LLP member
Authorized Signatory

of _____ , hereby submit this application for _____
Name of the Entity/Corporation Transaction(s) you are applying for

(hereinafter the "Application"), to the local licensing authority (the "LLA") and the Alcoholic Beverages Control Commission (the "ABCC" and together with the LLA collectively the "Licensing Authorities") for approval.

I do hereby declare under the pains and penalties of perjury that I have personal knowledge of the information submitted in the Application, and as such affirm that all statement and representations therein are true to the best of my knowledge and belief. I further submit the following to be true and accurate:

(1) I understand that each representation in this Application is material to the Licensing Authorities' decision on the Application and that the Licensing Authorities will rely on each and every answer in the Application and accompanying documents in reaching its decision;

(2) I state that the location and description of the proposed licensed premises does not violate any requirement of the ABCC or other state law or local ordinances;

(3) I understand that while the Application is pending, I must notify the Licensing Authorities of any change in the information submitted therein. I understand that failure to give such notice to the Licensing Authorities may result in disapproval of the Application;

(4) I understand that upon approval of the Application, I must notify the Licensing Authorities of any change in the Application information as approved by the Licensing Authorities. I understand that failure to give such notice to the Licensing Authorities may result in sanctions including revocation of any license for which this Application is submitted;

(5) I understand that the licensee will be bound by the statements and representations made in the Application, including, but not limited to the identity of persons with an ownership or financial interest in the license;

(6) I understand that all statements and representations made become conditions of the license;

(7) I understand that any physical alterations to or changes to the size of, the area used for the sale, delivery, storage, or consumption of alcoholic beverages, must be reported to the Licensing Authorities and may require the prior approval of the Licensing Authorities;

(8) I understand that the licensee's failure to operate the licensed premises in accordance with the statements and representations made in the Application may result in sanctions, including the revocation of any license for which the Application was submitted; and

(9) I understand that any false statement or misrepresentation will constitute cause for disapproval of the Application or sanctions including revocation of any license for which this Application is submitted.

Signature: _____ Date: _____

Title: _____