

8. If applicant is an individual or partnership: List for individual or each partner.

Full Name	Home Address	D.O.B.	SSN

8a. Is individual or are all partners United States citizens? Yes No

If no, specify citizenship: _____

8b. Is individual or are all partners involved at least twenty-one years old? Yes No

9. If the applicant is a corporation, complete the following:

State of Incorporation:	Date of Incorporation:
Fiscal Year Ends:	Date qualified to do business in MA:

9a. How many shares of stock are authorized? _____ How many shares of stock are issued? _____

Provide in the box below the names of all officers, directors, stockholders and manager.

Use * to indicate director

Title	Full Name	Home Address	D.O.B.	SSN	Shares of stock owned or controlled

9b. Attach a copy of the vote by the Board of Directors appointing a manager or principal representative.

9c. If the applicant is a corporation, answer the following questions:

1. Are the majority of directors United States citizens? Yes No

2. Are the majority of directors citizens of Massachusetts? Yes No

3. Is the manager or principal representative a U.S. citizen? Yes No

10. If the applicant is an association, provide in the box below the names of all association officers and members.

Title	Full Name	Home Address	D.O.B.	SSN	Phone Number

11. Will there be any construction, remodeling, redecorating or building on the premises for this license?
 Yes No (If yes complete a,b,c, and d)

a. Give an exact description of the construction, remodeling, redecorating or building on the premises : _____

b. What are the estimated costs? _____

c. What is the construction schedule? _____

d. State all sources of construction financing: _____

12. Do you own the premises? Yes No. If yes, please respond to the question below.

As an individual Jointly _____ Name of Realty Trust

_____ Name of Corporation

Other _____

(specify)

(If you are do not own the premises to be licensed, provide the following information about the owner.)

Name:	Phone number: ()
Address:	

12a. If a lease or rental, provide the following information: \$ _____ per _____
Beginning date of lease _____ Ending date of lease _____
(provide a copy of the lease.) (month, year, etc.)

Financial

13. What assets were purchased and cost?

Equipment: \$	Furniture: \$	Goodwill: \$
Inventory: \$	License: \$	Premise: \$

13a.

Total Purchase Price: \$ _____

13b.

Identify in the box below all sources of financing?

Mortgage: \$	Seller: \$
Cash: \$	Other (specify): \$

Document all sources e.g., -Loan papers, checking accounts, stock sales, etc.)

13c.

All other terms and conditions:

(provide purchase and sale documents)

13d. Are you seeking approval for license to be pledged? Yes No

If yes, to whom? _____

13e. Will the inventory be pledged? Yes No

If yes, specify to whom _____

13f. If a corporation, are you seeking approval for any corporate stock to be pledged? Yes No

If yes, identify to whom and identify the number of shares to be pledged. _____

OWNERSHIP INTERESTS

14. State the following information for all persons or entities who will have any direct or indirect beneficial or financial interest in this license:

Full Name	Home address	D.O.B.	SSN	Phone Number

14a. Describe all types of beneficial or financial interest each person or entity identified in Question 14 will have in this license:

Person or entity	Beneficial or financial interest

14b. Does any person or entity listed in Question 14 have any direct or indirect beneficial or financial interest in any other license granted under Chapter 138?

Yes No (If yes, provide the following for each person or entity.)

Name	Type of license	License name and address	Description of Interest

14c. Has any person or entity named in Question 14 ever held a license or a beneficial interest in a license issued under Chapter 138 which is not presently held? Yes No (If yes, provide following for each person or entity.)

Name	Type of License	License name and address	Date ownership surrendered

14d. Describe how all licenses identified in Question 14c were terminated (e.g. transfer of ownership, non-renewal, surrender, etc.):

Date	License	Reason why the license was terminated

14e. Has any person or entity named in Question 14 ever had a license suspended, revoked, or cancelled? No (If yes, provide the following information) Yes

Date	License	Reason why the license was suspended, revoked, or cancelled

14f. Has any person or entity named in Question 14 ever been convicted of violating any state, federal or military law? Yes No (If yes, attach a statement of details.)

15. a. Each individual applicant must sign.
 b. Applications by a partnership must be signed by a majority of the partners.
 c. Applications by a corporation must be signed by an officer authorized by a vote of the corporations Board of Directors.
 d. Applications by an association must be signed by a majority of the members of the governing body. All signers must have answered question 10.
 e. False information or failure to disclose are reasons to revoke a license or deny a license application.

Signed and subscribed to under the penalty of perjury, this _____ day of _____, 19_____.

Signature of Full Name	Title
_____	_____
_____	_____
_____	_____
_____	_____