



NEW LIQUOR LICENSE APPLICATION INFORMATION / PROCESS

Listed below are all forms and supporting documents that must be submitted to the Local Licensing Authority for a New Liquor License. **All forms and documents must be properly signed and correspond exactly with the name of the applicant.**

License Application: Completed State Form DR8404 (Retail License Application) *or* DR8403 (3.2% Off-Premise)

- ✓ Original (additional copy if requesting a concurrent review with State Liquor Enforcement. Concurrent review is available on *new license applications only*.)
- ✓ All appropriate sections completed
- ✓ Authorized signature
- ✓ Appropriate Fees attached (see attached schedule)

Proof of Possession and Diagram: This includes a copy of a deed, lease or sublease. Term of the deed, lease or sublease should be for at least one year from the date of issuance of the liquor license. Deed, lease or sublease **must be** in the name of the applicant, i.e. the LLC or Corp., not an individual.

- ✓ All documents must be signed
- ✓ Floor diagram of premises, no larger than 8 ½ X 11, with area to be licensed outlined in red. Each floor should be drawn separately. Outdoor seating, liquor storage areas, etc., should be indicated on the drawing. Dimensions must be included however the drawing does not have to be to scale. If applying for a Hotel/Restaurant license, the kitchen must be shown on the diagram. Make sure the diagram includes the entire area you want to be included on the license.
- ✓

Financial Documents: Copies of all notes, loans, security agreements, purchase agreements, stock transfer agreements, etc., used in and for the business. All copies must total the amount claimed on the application.

Background Information: Individual History Record (Form DR8404-I) must be submitted for each individual applicant, all general partners, all limited partners with 10% or more interest, all corporate officers & directors, all 10% or more stockholders, all LLC managing members, all LLC members with 10% or more interest, and any personal loan makers.

Fingerprints: Each person required to fill out an Individual History Record must be fingerprinted for a background investigation. Fingerprints can be done at the Littleton Police Department, Tuesday – Thursday from 1-4 p.m. (please call 303-795-3880 for more information). Fee of \$38.50 per person fingerprinted, payable to City of Littleton. Fee(s) can be included in check to cover application fees.

Manager's Registration (if different from applicant/owner): Must be completed for a Hotel/Restaurant or Tavern class of license only if the manager is someone other than the applicant(s). Managers other than owners must complete fingerprinting and background investigation. Checks in the amount(s) of \$75 to the City of Littleton, \$75 to the Colorado Department of Revenue, and \$38.50 to the Colorado Department of Public Safety for the background investigation.

Additional Documents needed dependant on type of business.

Sole Proprietor:

Individual History Record (All Sole Proprietors, if husband and wife – both) DR4679 Affidavit – Restrictions on Public Benefits

Partnership Applicant: Individual History Record (All general partners, if husband and wife – both)

DR4679 Affidavit – Restrictions on Public Benefits Partnership agreement – except for husband-wife partnerships

Certificate of co-partnership – if applicable

Certificate of Good Standing from Secretary of State's office issued within 2 years from date of application

Limited Liability Applicant: Individual History Record (10% or more stockholders, limited partners, or members; all managers of an LLC)
Date-stamped Articles of Organization
Certificate of Good Standing from Secretary of State's office within 2 years from date of application
Operating Agreement

Corporate Applicant: Individual History Record (10% or more stockholders, limited partners, or members; all corporate officers and directors)

Date-stamped Articles of Incorporation

Certificate of Good Standing from Secretary of State issued within 2 years from date of application

If Applicant is a Subsidiary Corporation: List name and address of parent corporation; List name, DOB, and address of all officers, directors and stockholders holding 10% or more of the parent company; Background investigation done on one principal officer of Parent Corporation

PUBLIC HEARING

The Littleton Licensing Authority meets the second Wednesday of each month at 7:00 p.m. at the Littleton Center, 2255 West Berry Avenue in the Council Chamber. Upon receipt of a *complete* application for a new license, the City Clerk will determine the neighborhood boundaries and schedule a public hearing to be held no sooner than 30 days from the date of the application. A representative of the business **MUST** attend this hearing. The City Clerk will notify the applicant, via U.S. Mail, of the proposed boundaries and the scheduled hearing date.

Not less than 10 days prior to the date of the public hearing, the premises must be posted with a public hearing sign. Public hearing signs are prepared by the City Clerk's office and applicant will be notified to when the sign is ready for posting. Applicant must provide proof of posting to the City Clerk's office. The City Clerk will publish notice of public hearing in the Littleton Independent.

The Licensing Authority considers the reasonable requirements of the neighborhood to which the applicant seeks a New License and the desires of the adult inhabitants as evidenced by petition. The petition process cannot begin before the applicant has received the proposed boundaries from the City Clerk and a signed "Waiver of Hearing" form is received in the City Clerk's office. If you have objections to the boundaries, a special hearing will be set to determine the boundaries. Signatures on petitions should be obtained from the designated neighborhood boundaries. The completed petitions must be submitted to the City Clerk's Office not less than 14 days prior to the public hearing date.

Food Service Requirements

3.2% Beer Licensees are not obligated to serve food at any time.

On-Premises Liquor Licenses:

Club licensees, Arts licensees, Optional premises licensees, and Public Transportation System licensees are not obligated to serve food at any time.

Hotel and Restaurant licensees must have full meals available until 8:00 p.m. everyday, and snacks and sandwiches after 8:00 p.m. Food sales must provide at least 25% of the gross income from the sale of food and beverages.

Brew Pubs must serve meals and must derive 15% of the on-premises gross sales from the sale of food.

Taverns and Beer & Wine licensees must have sandwiches and snacks available during operating hours.

When food is required to be served, it must be available wherever alcoholic beverages are served.

Off-premises Liquor Licenses:

Liquor stores are prohibited from the sale of food items except those approved by the State Licensing Authority that are prepackaged, labeled, directly related to the consumption of liquor, and are sold in containers up to 16 ounces for the purpose of cocktail garnish. Liquor-licensed Drug stores are not subject to prohibitions or requirements regarding sale of food items.

Complete applications, with appropriate funds and applicable paperwork, must be submitted to your local Licensing Authority at: City of Littleton, City Clerk's Office; 2255 West Berry Avenue. Please call 303-795-3780 with any questions.

NEW LIQUOR LICENSE APPLICATION - FORMS

Name & Address of Applicant _____

Date application received _____

Concurrent Review? _____

_____ Form 8404 – Retail License Application or 8403 – 3.2% / Fermented Malt Beverage Application

_____ Form 8404-I - Individual History Record

_____ Lawful Presence Affidavit (sole proprietorship only)

_____ Fees – State and Local

_____ Fingerprints

_____ State Sales Tax number

_____ Lease or Deed in name of applicant (expiration date: _____)

_____ List/Copies of notes and loans

_____ Diagram of premises

If application is for a Hotel & Restaurant or Tavern license:

_____ Manager's Registration form (8404-I) & fee (unless manager is owner)

If applicant is a corporation:

_____ Articles of Incorporation
(date stamped by Colorado Secretary of State's office)

_____ Certificate of Good Standing if incorporated more than 2 years ago

If applicant is a partnership:

_____ Partnership Agreement

If applicant is a limited liability company:

_____ Articles of Organization
(date stamped by Colorado Secretary of State's office)

_____ Operating Agreement



3.2% Beer Liquor License Fee Schedule

Checks Required:

- \$1,418.75 City of Littleton
- \$1,221.25 Colorado Department of Revenue
- \$38.50 City of Littleton (for each background check) Company
Check or Money Order - **No personal checks**



	<u>City Fees</u>	<u>State Fees</u>
Application	\$695.00	\$600.00
Concurrent Review		\$100.00
License	\$723.75	\$96.25
	<hr/> <hr/>	<hr/> <hr/>
Total	\$1,418.75	\$796.25

Plus fees for background checks \$38.50 each

City license fee:

\$3.75	License
<u>\$720.00</u>	Occupation Tax
\$723.75	Total

Colorado Fermented Malt Beverage (3.2% Beer) License Application

New License
 New-Concurrent
 Transfer of Ownership

- All answers must be printed in black ink or typewritten
- Applicant must check the appropriate box(es)
- Local license fee \$ _____
- Applicant should obtain a copy of the Colorado Liquor and Beer Code: www.colorado.gov/enforcement/liquor

1. Applicant is applying as a/an

Corporation
 Partnership (includes Limited Liability and Husband and Wife Partnerships)
 Individual
 Limited Liability Company
 Association or Other

2. Applicant(s) If an LLC, name of LLC; if partnership, at least 2 partners' names; if corporation, name of corporation FEIN

2a. Trade Name of Establishment (DBA)	State Sales Tax No.	Business Telephone
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3. Address of Premises (specify exact location of premises)

City	County	State	ZIP Code
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4. Mailing Address (Number and Street)	City or Town	State	ZIP Code
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5. Email Address

6. If the premises currently has a liquor or beer license, you MUST answer the following questions

Present Trade Name of Establishment (DBA)	Present State License No.	Present Class of License	Present Expiration Date
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Section A Nonrefundable Application Fees	Section B 3.2% Beer License Fees
<input type="checkbox"/> Application Fee for New License \$600.00	<input type="checkbox"/> Retail 3.2% Beer On-Premises (City) \$96.25
<input type="checkbox"/> Application Fee for New License - w/Concurrent Review \$700.00	<input type="checkbox"/> Retail 3.2% Beer On-Premises (County) \$117.50
<input type="checkbox"/> Application Fee for Transfer \$600.00	<input type="checkbox"/> Retail 3.2% Beer Off-Premises (City) \$96.25
	<input type="checkbox"/> Retail 3.2% Beer Off-Premises (County) \$117.50
	<input type="checkbox"/> Retail 3.2% Beer On/Off Premises (City) \$96.25
	<input type="checkbox"/> Retail 3.2% Beer On/Off Premises (County) \$117.50
	<input type="checkbox"/> Master File Location Fee \$25.00 x _____ To _____
	<input type="checkbox"/> Master File Background \$250.00 x _____ Total _____

Questions? Visit www.colorado.gov/enforcement/liquor for more information
Do Not Write In This Space - For Department Of Revenue Use Only

Liability Information

License Account Number	Liability Date:	License Issued Through: (Expiration Date)	Total
			\$

Application Documents Checklist and Worksheet

Instructions: This check list should be utilized to assist applicants with filing all required documents for licensure. **All** documents must be properly signed and correspond with the name of the applicant exactly. **All** documents must be typed or legibly printed. Upon final State approval the license will be mailed to the local licensing authority. Application fees are nonrefundable.

Questions? Visit: www.colorado.gov/enforcement/liquor for more information.

Items Submitted, Please Check all Appropriate Boxes Completed or Documents Submitted	
I.	Applicant Information <input type="checkbox"/> A. Applicant/Licensee identified <input type="checkbox"/> B. State sales tax license number listed or applied for at time of application <input type="checkbox"/> C. License type or other transaction identified <input type="checkbox"/> D. Submit originals to local authority <input type="checkbox"/> E. Additional information may be required by the local licensing authority
II.	Diagram of the Premises <input type="checkbox"/> A. No larger than 8 1/2" X 11" <input type="checkbox"/> B. Dimensions included (does not have to be to scale). Exterior areas should show control (fences, walls, etc.) <input type="checkbox"/> C. Separate diagram for each floor (if multiple levels) <input type="checkbox"/> D. Bold/Outlined licensed premises
III.	Proof of Property Possession (One Year Needed) <input type="checkbox"/> A. Deed in name of the Applicant ONLY (or) (matching question #2) date stamped/filed with County Clerk <input type="checkbox"/> B. Lease in the name of the Applicant ONLY (matching question #2) <input type="checkbox"/> C. Lease Assignment in the name of the Applicant (ONLY) with proper consent from the Landlord and acceptance by the Applicant <input type="checkbox"/> D. Other Agreement if not deed or lease (attach prior lease to show right to assumption)
IV.	Background Information and Financial Documents <input type="checkbox"/> A. Individual History Record(s) (Form DR 8404-I) <input type="checkbox"/> B. Fingerprints taken and submitted to local authority. (State authority for master file applicants.) <input type="checkbox"/> C. Purchase agreement, stock transfer agreement, and or authorization to transfer license <input type="checkbox"/> D. List of all notes and loans.
V.	Sole Proprietor/Husband and Wife Partnership <input type="checkbox"/> A. Form DR 4679 <input type="checkbox"/> B. Copy of State Issued Driver's License or Identification Card for each Applicant
VI.	Corporate Applicant Information (If Applicable) <input type="checkbox"/> A. Certificate of Incorporation (and/or) <input type="checkbox"/> B. Certificate of Good Standing <input type="checkbox"/> C. Certificate of Authorization if foreign corporation <input type="checkbox"/> D. List of officers, directors and stockholders of parent corporation (designate one person as "principal officer")
VII.	Partnership Applicant Information (If Applicable) <input type="checkbox"/> A. Partnership Agreement (general or limited). Not needed if husband and wife <input type="checkbox"/> B. Certificate of Good Standing (if formed after 2009)
VIII.	Limited Liability Company Applicant Information (If Applicable) <input type="checkbox"/> A. Copy of articles of organization (date stamped by Colorado Secretary of State's Office) <input type="checkbox"/> B. Certificate of Good Standing if organized more than two years <input type="checkbox"/> C. Copy of operating agreement <input type="checkbox"/> D. Certificate of Authority (if foreign company)

7. Is the applicant (including any of the partners, if a partnership; members or manager if a limited liability company; or officers, stockholders or directors if a corporation) or manager under the age of twenty-one years?	Yes	No		
	<input type="checkbox"/>	<input type="checkbox"/>		
8. Has the applicant (including any of the partners, if a partnership; members or manager if a limited liability company; or officers, stockholders or directors if a corporation) or manager ever (in Colorado or any other state):				
(a) been denied an alcohol beverage license?	<input type="checkbox"/>	<input type="checkbox"/>		
(b) had an alcohol beverage license suspended or revoked?	<input type="checkbox"/>	<input type="checkbox"/>		
(c) had interest in another entity that had an alcohol beverage license suspended or revoked?	<input type="checkbox"/>	<input type="checkbox"/>		
If you answered yes to 8a, b or c, explain in detail on a separate sheet				
9. Has a 3.2 beer license for the premises to be licensed been denied within the preceding one year? If "yes," explain in detail.	<input type="checkbox"/>	<input type="checkbox"/>		
10. Has a liquor or beer license ever been issued to the applicant (including any of the partners, if a partnership; members or manager if a limited liability company; or officers, stockholders or directors if a corporation)? If yes, identify the name of the business and list any current or former financial interest in said business including any loans to or from a licensee.	<input type="checkbox"/>	<input type="checkbox"/>		
11. Does the Applicant, as listed on line 2 of this application, have legal possession of the premises by virtue of ownership, lease or other arrangement?	<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/> Ownership <input type="checkbox"/> Lease <input type="checkbox"/> Other (Explain in Detail) _____				
a. If leased, list name of landlord and tenant, and date of expiration, EXACTLY as they appear on the lease:				
Landlord	Tenant	Expires		
b. Is a percentage of alcohol sales included as compensation to the landlord? If yes complete question 12.	<input type="checkbox"/>	<input type="checkbox"/>		
c. Attach a diagram and outline or designate the area to be licensed (including dimensions) which shows the bars, brewery, walls, partitions, entrances, exits and what each room shall be utilized for in this business. This diagram should be no larger than 8 1/2" X 11".				
12. Who, besides the owners listed in this application (including persons, firms, partnerships, corporations, limited liability companies), will loan or give money, inventory, furniture or equipment to or for use in this business; or who will receive money from this business. Attach a separate sheet if necessary.				
Last Name	First Name	Date of Birth	FEIN or SSN	Interest
Last Name	First Name	Date of Birth	FEIN or SSN	Interest
Attach copies of all notes and security instruments, and any written agreement, or details of any oral agreement, by which any person (including partnerships, corporations, limited liability companies, etc.) will share in the profit or gross proceeds of this establishment, and any agreement relating to the business which is contingent or conditional in any way by volume, profit, sales, giving of advice or consultation.				
13. Name of Manager for all on and on/off applicants.				
Last Name	First Name	Date of Birth		
14. Does this manager act as the manager of, or have a financial interest in, any other liquor licensed establishment in the State of Colorado? If yes, provide name, type of license and account number.				
<input type="checkbox"/> <input type="checkbox"/>				
15. Tax Distraint Information. Does the applicant or any other person listed on this application and including its partners, officers, directors, stockholders, members (LLC) or managing members (LLC) and any other persons with a 10% or greater financial interest in the applicant currently have an outstanding tax distraint issued to them by the Colorado Department of Revenue?				
<input type="checkbox"/> <input type="checkbox"/>				
If yes, provide an explanation and include copies of any payment agreements.				

16. **If applicant is a corporation, partnership, association or limited liability company, applicant must list all officers, directors, general partners, and managing members. In addition, applicant must list any stockholders, partners, or members with ownership of 10% of more in the applicant. All persons listed below must also attach form DR8404-I (Individual History Record), and submit fingerprint cards to their local licensing authority.

Name	Home Address, City & State	Date of Birth	Position	% Owned
Name	Home Address, City & State	Date of Birth	Position	% Owned
Name	Home Address, City & State	Date of Birth	Position	% Owned
Name	Home Address, City & State	Date of Birth	Position	% Owned
Name	Home Address, City & State	Date of Birth	Position	% Owned

** Limited Liability Companies and Partnerships - 100% of ownership must be accounted for on question #16
 ** Corporations - The President, Vice-President, Secretary and Treasurer must be accounted for on question #16
 (Include ownership percentage if applicable)

Oath of Applicant

I declare under penalty of perjury in the second degree that this application and all attachments are true, correct, and complete to the best of my knowledge. I also acknowledge that it is my responsibility and the responsibility of my agents and employees to comply with the provisions of the Colorado Liquor or Beer Code which affect my license.

Authorized Signature	Printed Name and Title	Date
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Report and Approval of Local Licensing Authority (City/County)

Date application filed with local authority	Date of local authority hearing (for new license applicants cannot be less than 30 days from date of application 12-47-311 (1) C.R.S.)
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Each person required to file DR 8404-I has

- Been fingerprinted
- Been subject to background investigation, including NCIC/CCIC check for outstanding warrants

That the local authority has conducted, or intends to conduct, an inspection of the proposed premises to ensure that the applicant is in compliance with, and aware of, liquor code provisions affecting their class of license.

(Check One)

- Date of Inspection or Anticipated Date _____
- Upon approval of state licensing authority

The foregoing application has been examined; and the premises, business to be conducted, and character of the applicant are satisfactory. We do report that such license, if granted, will meet the reasonable requirements of the neighborhood and the desires of the adult inhabitants, and will comply with the provisions of Title 12, Article 46 or 47, C.R.S. **Therefore, this application is approved.**

Local Licensing Authority for	Telephone Number	<input type="checkbox"/> Town, City <input type="checkbox"/> County	
Signature	Printed Name	Title	Date
Signature (attest)	Printed Name	Title	Date

Individual History Record

To be completed by the following persons, as applicable: sole proprietors; general partners regardless of percentage ownership, and limited partners owning 10% or more of the partnership; all principal officers of a corporation, all directors of a corporation, and any stockholder of a corporation owning 10% or more of the outstanding stock; managing members or officers of a limited liability company, and members owning 10% or more of the company; and any intended registered manager of Hotel and Restaurant or Tavern class of retail license

Notice: This individual history record requires information that is necessary for the licensing investigation or inquiry. All questions must be answered in their entirety or the license application may be delayed or denied. If a question is not applicable, please indicate so by "N/A". **Any deliberate misrepresentation or material omission may jeopardize the license application.** (Please attach a separate sheet if necessary to enable you to answer questions completely)

1. Name of Business		Home Phone Number	Cellular Number	
2. Your Full Name (last, first, middle)		3. List any other names you have used		
4. Mailing address (if different from residence)		Email Address		
5. List current residence address. Include any previous addresses within the last five years. (Attach separate sheet if necessary)				
Street and Number		City, State, Zip		From
To				
Current				
Previous				
6. List all employment within the last five years. Include any self-employment. (Attach separate sheet if necessary)				
Name of Employer or Business		Address (Street, Number, City, State, Zip)		Position Held
From		To		
7. List the name(s) of relatives working in or holding a financial interest in the Colorado alcohol beverage industry.				
Name of Relative		Relationship to You		Position Held
Name of Licensee				
8. Have you ever applied for, held, or had an interest in a Colorado Liquor or Beer License, or loaned money, furniture, fixtures, equipment or inventory to any licensee? (If yes, answer in detail.) <input type="checkbox"/> Yes <input type="checkbox"/> No				
9. Have you ever received a violation notice, suspension, or revocation for a liquor law violation, or have you applied for or been denied a liquor or beer license anywhere in the United States? (If yes, explain in detail.) <input type="checkbox"/> Yes <input type="checkbox"/> No				

10. Have you ever been convicted of a crime or received a suspended sentence, deferred sentence, or forfeited bail for any offense in criminal or military court or do you have any charges pending? (If yes, explain in detail.) Yes No

11. Are you currently under probation (supervised or unsupervised), parole, or completing the requirements of a deferred sentence? (If yes, explain in detail.) Yes No

12. Have you ever had any professional license suspended, revoked, or denied? (If yes, explain in detail.) Yes No

Personal and Financial Information

Unless otherwise provided by law, the personal information required in question #13 will be treated as confidential. The personal information required in question #13 is solely for identification purposes.

13a. Date of Birth b. Social Security Number c. Place of Birth d. U.S. Citizen Yes No

e. If Naturalized, state where f. When g. Name of District Court

h. Naturalization Certificate Number i. Date of Certification j. If an Alien, Give Alien's Registration Card Number k. Permanent Residence Card Number

l. Height m. Weight n. Hair Color o. Eye Color p. Gender q. Race r. Do you have a current Driver's License/ID? If so, give number and state. Yes No # _____ State _____

14. Financial Information.

a. Total purchase price or investment being made by the applying entity, corporation, partnership, limited liability company, other. \$ _____

b. List the total amount of the **personal** investment, made by the person listed on question #2, in this business including any notes, loans, cash, services or equipment, operating capital, stock purchases or fees paid. \$ _____
 * If corporate investment only please skip to and complete section (d)
 ** Section b should reflect the total of sections c and e

c. Provide details of the personal investment described in 14b. You must account for all of the sources of this investment. (Attach a separate sheet if needed)

Type: Cash, Services or Equipment	Account Type	Bank Name	Amount

d. Provide details of the corporate investment described in 14 b. You must account for all of the sources of this investment. (Attach a separate sheet if needed)

Type: Cash, Services or Equipment	Loans	Account Type	Bank Name	Amount

e. Loan Information (Attach copies of all notes or loans)

Name of Lender	Address	Term	Security	Amount

Oath of Applicant

I declare under penalty of perjury that this application and all attachments are true, correct, and complete to the best of my knowledge.

Authorized Signature Print Signature Title Date



AFFIDAVIT - RESTRICTIONS ON PUBLIC BENEFITS

I, _____, swear or affirm under penalty of perjury under the laws of the State of Colorado that **(check one)**:

- I am a United States citizen.
- I am not a United States citizen but I am a Permanent Resident of the United States.
- I am not a United States citizen but I am lawfully present in the United States pursuant to Federal law.
- I am a foreign national not physically present in the United States.

I understand that this sworn statement is required by law because I have applied for a public benefit. I understand that state law requires me to provide proof that I am lawfully present in the United States prior to receipt of this public benefit. I further acknowledge that making a false, fictitious, or fraudulent statement or representation in this sworn affidavit is punishable under the criminal laws of Colorado as perjury in the second degree under Colorado Revised Statute 18-8-503 and it shall constitute a separate criminal offense each time a public benefit is fraudulently received.

Signature

Date



There are several departments at the City of Littleton that you may need to work with in order to be in compliance with local regulations. Please be sure to contact each one so you remain informed of any requirements that relate to your business and receive all the information you need concerning City services.

Building Department (Permits, Codes and Inspections)
303-795-3784 (or) 303-795-3754

Planning Department (Zoning, Signs)
303-795-3748

Sales Tax Department (Sales Tax licensing and remittal questions)
303-795-3768

Economic Development (Business Services)
303-795-3749

Public Services (Utilities, Sewer, Engineering, Trees/Landscaping, Traffic Control)
303-795-3863

Fire Department
303-795-3800

Police Department
303-795-3875

Tri-County Health Department (If you plan on serving or selling any food)
303-220-9200



2255 WEST BERRY AVENUE
LITTLETON, COLORADO 80120

Business Emergency Contact Information

This information will be used for after hour emergencies when access is required into the business by the Police Department or Fire Department

Name of Business _____

Business Address _____

Business Telephone Number _____

Emergency Contact Name #1 _____

Emergency Contact Telephone Number #1 _____

Emergency Contact Name #2 _____

Emergency Contact Telephone Number #2 _____

This information is effective as of _____