



TEXAS ALCOHOLIC  
BEVERAGE COMMISSION  
*Texans Helping Businesses & Protecting Communities*

# EXAMPLE

This document provides a reference of some of the relevant pages that may be submitted for local government certification.

Document reference ID : XXXX

## Licensing Application Summary

You must review your application and confirm that the information displayed here is correct. Select **Review and Confirm** to continue and make the payment. If the information is not correct, select **Next** to return to the application, edit the data as needed and finalize the submission. If you need to store the application packet for your records, select **Download**.

**Application ID:** XXXX

**Applicant Name:** XXXX Inc.

**License Type applied for:** Wine and Malt Beverage Retailer's Off-Premise Permit (BQ)

### Entity Information

**Business Structure:** Corporation

**FEIN/SSN Number:** 55555555

**Historically Underutilized Business:** No

**Veteran-owned business:** No

**Fraternal Owned:** No

**Secretary of State Filing Number:** 55555555

**Date Filed:** 12/1/2021

**Filing State:** TX

### Primary Business Entity Contact Information

**Legal First Name:** John

**Legal Middle Name:** Doe

**Email Address:** sample@example.com

**Phone Number:** 555-555-5555

## Initial Application Information

**Authority Type:** I am a principal or authorized user with binding authority

**Legal First Name:** John

**Legal Last Name:** Doe

**Email Address:** sample@example.com

**Phone Number:** 555-555-5555

## Principal Parties

<b>Principal Parent Entity</b>	<b>Principal Party</b>	<b>Role</b>	<b>%Ownership</b>
XXXX Inc.	John Doe	Director, Officer, President, Secretary, Stockholder/Shareholder, Treasurer, Vice President	100



**CERTIFICATE OF CITY SECRETARY FOR: (P, Q, BF & BQ)**

Section 11.37 & 61.37

Not later than the 30th day after the date a prospective applicant for a license or permit requests certification, the city secretary or clerk shall certify whether the location or address given in the request is in a wet area and whether the sale of alcoholic beverages for which the license or permit is sought is prohibited by ordinance.

I hereby certify on this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, that the location for which the license/permit is sought is inside the boundaries of this city or town, in a "wet" area for such license/permit, and not prohibited by charter or ordinance in reference to the sale of such alcoholic beverages.

**BF**

**BF,BQ,Q** The legal sale of malt beverages and wine for off-premise consumption only

**BF,BQ,Q,P** The legal sale of allalcoholic beverages for off-premise consumption only

**OR** The legal sale of malt beverages for off-premise consumption only **greater than 5%** alcohol by volume **OR**   
5% or less alcohol by volume

I hereby refuse on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_ to certify this location.

SIGN HERE

\_\_\_\_\_  
City Secretary/Clerk

\_\_\_\_\_, TEXAS  
City

**SEAL**



**TEXAS ALCOHOLIC BEVERAGE COMMISSION**  
*Texans Helping Businesses & Protecting Communities*

**CERTIFICATE OF COUNTY CLERK FOR: (P, Q , BF & BQ)**

Section 11.37 & 61.37

Not later than the 30th day after the date a prospective applicant for a license or permit requests certification, the city secretary or clerk shall certify whether the location or address given in the request is in a wet area and whether the sale of alcoholic beverages for which the license or permit is sought is prohibited by ordinance.

I hereby certify on this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, that the location for which the license/permit is sought is in a "wet" and is not prohibited by any valid order of the Commissioner's Court.

- BF** The legal sale of malt beverages for off-premise consumption only  **greater than 5%** alcohol by volume **OR**  **5% or less** alcohol by volume
- BF,BQ,Q** The legal sale of malt beverages and wine for off-premise consumption only
- BF,BQ,Q,P** The legal sale of all alcoholic beverages for off-premise consumption only

**OR**

I hereby refuse on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_ to certify this location.

SIGN HERE

\_\_\_\_\_  
County Clerk

\_\_\_\_\_  
County

**SEAL**