# TEXAS ALCOHOLIC BEVERAGE COMMISSION Texans Helping Businesses & Protecting Communities

# PROMOTIONAL PERMIT (PR)

L-PR (8/2021)

	-c COM:					(8/2021)				
,, כ	>		ISSUE DATE		FEE					
<u> </u>	PR-				\$1200					
		,	Registry No.	·						
	INFORMATION AND INSTRUCTIONS									
_	his normit authorizes the holder to engage in activi	tion to promote and enhance th	as sale of an alcoholic	hoverage in this etc	ata including activitie	on that				
ta	This permit authorizes the holder to engage in activities to promote and enhance the sale of an alcoholic beverage in this state, including activities that take place on the premises of the holder of a permit or license under this code, on the behalf of a distiller, brewer, rectifier, manufacturer or winery with whom the promotional permit holder has entered into a contract for the purposes of Chapter 50 of the Texas Alcoholic Beverage Code.  • A copy of all contracts with licensed or permitted entities must be available at the event and kept on file by the permitee.  • An employment card must be provided to all agents, servants, or employees that are participating in promotional events. See sample card below for required information. Employees must be in possession of the card during promotional events.  • The application will not be approved if the applicant, agents, servants, or employees, have any financial interest in an entity, either directly or indirectly, holding a permit or license issued by the Texas Alcoholic Beverage Commission other than a contract to promote and enhance the sale of alcoholic beverages.									
		Promotional Permit Em	ployee ID Card	1						
	E	EMPLOYEE NAME:		]						
	E	EMPLOYMENT DATE:								
	F	PERMIT HOLDER:		]						
	F	PERMIT NUMBER:								
	ALL IN	FORMATION SHOWN ON SAI	MPLE CARD IS REQU	J JIRED						
		APPLICAT	ION							
		Corporation Limited Liability Partnership	Limited Liabili Other	ty Company -	☐ Partnership					
	3. Mailing Address		City		State	Zip Code				
	Address of Location		City		State	Zip Code				
	4. Business Phone No. Alternate	Phone No.	E-Mail Address:							
		INDIVIDUAL O	WNER							
	5. Full Legal Name (Last, First, Middle)									
	Social Security Number Issuing S	State /Driver License Number	]	Date of Birth (mm/d	d/yyyy)					
	Residential Address		City		State	Zip Code				
	INITIAL APPLICATION INCOMPLETE YES - NO	ADDITIONAL CORRES YES - NO	PONDENCE	PROCESSOR F	REVIEW DATE:					
TABC USE ONLY	PROCESS DATE:	PROCESSOR I.D.:		PROCESSOR E	ERROR					
TABC		TABC DATE	STAMP							

### REPORTING OWNERSHIP

If multiple levels of ownership, use this form to disclose each entity at each level. Use additional copies if necessary to disclose each level.

- If applicant is a partnership, 100% of the interest in the partnership must be accounted for among the partners listed. If one or more of your general or limited partners is a limited partnership or limited liability partnership, complete an additional section of question 6 for each partnership. If one or more of your general or limited partners is a corporation, complete question 6 for each corporation or Limited Liability Company.
- If applicant is a corporation and stockholder is corporation, provide pertinent information as indicated in question 6F.

PARTNERSHIPS / CORPORATIONS / LIMITED LIABILITY COMPANY							
Indicate type of ownership and complete the information below:  6A.   Corporation Limited Liability Company Partnership Limited Partnership Limited Liability Partnership							
B. Federal Employer's I.D. No.:							
C. Entity Name:							
D. Filing No.:		proved		State			
E. Number and class of shares, memberships or units issued:							
6F. COMPLETE THE FOLLOWING FOR RE	PORTING OWN	IERSHIP:					
Officer Director/ Manager Stockholder/N	Member						
Last Name	First Name		MI	Date of Birth			
SSN	Title		Class & N	lumber of Shares			
Residential Address		City	State	Zip Code			
Officer Director/ Manager Stockholder/Member							
Last Name	First Name		MI	Date of Birth			
SSN	Title		Class & N	Class & Number of Shares			
Residential Address		City	State	Zip Code			
Officer Director/ Manager Stockholder/N	Member						
Last Name First N		First Name		Date of Birth			
SSN Title			Class & Number of Shares				
Residential Address		City	State	Zip Code			
Officer Director/ Manager Stockholder/N	Member						
Last Name First Name			MI	Date of Birth			
SSN	Title		Class & No	o. of Shares			
Residential Address	1	City	State	ZIP Code			

(IF MORE SPACE IS NEEDED, USE ADDITIONAL COPIES OF THIS PAGE.)

## **ALL APPLICANTS**

Per chapter 50 of the Texas Alcoholic Beverage Code, The applicant or holder of a Promotional Permit **MAY NOT** hold an interest, directly or indirectly, in an entity holding another permit or license issued by the Texas Alcoholic Beverage Commission.

You, your agent, servant or employee **MAY NOT** be employed in any capacity by a permit/license holder except for the contract to promote and enhance alcoholic beverages for promotional events.

If you or anyone named in questions 5 or 6F, your agent, servant or employee are in violation of the above requirements, you are ineligible to hold this permit.

- **7A.** Has any person named in question 5 or 6F, or his or her spouse been finally convicted or received deferred adjudication for a felony offense?
- ☐ YES ☐ NO
- **7B.** If answer to 7A is "**YES**," has it been five years since the termination of a sentence, parole or probation served for any offenses indicated above?

☐ YES ☐ NO

If answer to 7B is "NO," attach an explanation.

7C. Has any person named in question 5 or 6F been convicted of any offense(s) under federal or state law, or municipal ordinance involving violations of an individual's civil rights or discrimination against an individual on the basis of race, color, creed or national origin?

☐ YES ☐ NO

### **AFFIRMATION**

### By signing below, I affirm:

- Copies of contracts will be available for review at events.
- · All agents, servants, or employees participating in promotional events will be provided with an employment card.
- I understand that employment cards must be in possession during promotional events.

### **ACKNOWLEDGMENT**

**WARNING**: Section 101.69 of the Texas Alcoholic Beverage Code states: "...a person who makes a false statement or false representation in an application for a permit or license or in a statement, report, or other instrument to be filed with the Commission and required to be sworn commits an offense punishable by imprisonment in the Texas Department of Criminal Justice for not less than 2 nor more than 10 years."

If Applicant is:	Who Must Sign:	See chart on left to determine who must sign PRINT	
Individual	Individual Owner	NAME:	
Partnership	Partner	SIGN	
Corporation	Officer	HERE:	
Ltd. Liability Co.	Officer or Manager	Before me, the undersigned authority, on this day of,	
Ltd/Ltd Liability Partnership	General Partner	20 the person whose name is signed to the foregoing application personally appeared and, duly sworn by me, states under oath that he or she has read the said application and that all	
		the facts therein set forth are true and correct.	
		SIGN HERE:	
SEAL		NOTARY PUBLIC	

### INSTRUCTIONS

- 1. The permit covered under this form will be issued for a two-year period. You MUST renew for the entire two-year period. The total amount of fees plus surcharges to cover the two-year period MUST be paid at the time of application. Fees may NOT be prorated or refunded.
- 2. Prepare the application in duplicate. Mail the original application with the correct permit fees to:

Texas Alcoholic Beverage Commission,

P.O. Box 13127

Austin, Texas 78711.

- 3. Fee must be paid with Cashier's Check, Money Order, or Firm Check from a corporate permittee made payable to the Comptroller of Public Accounts. **Personal checks will NOT be accepted**.
- 4. Retain duplicate copy for your files.

Class of Permit	Two-Year Fee
Promotional Permit	\$1,200.00