



TEXAS ALCOHOLIC  
BEVERAGE COMMISSION  
Texas Helping Businesses & Protecting Communities

## INFORMATION AND INSTRUCTIONS FOR A NONRESIDENT SELLER'S PERMIT (S), NONRESIDENT BREWER'S PERMIT (U) AND NONRESIDENT MANUFACTURER'S LICENSE (BS)

FORM L-NRES-I  
(10/2018)

### INFORMATION

**NONRESIDENT SELLER'S PERMIT (S)** - This permit allows the sale of wine and distilled spirits in excess of 4% by weight to Texas wholesalers or any other entities authorized to import alcohol into the state of Texas. The product must be shipped by a common carrier, which holds a Carrier's Permit. The State fee is \$300 with a surcharge of \$376 and will expire two years from the issue date.

**NONRESIDENT BREWER'S PERMIT (U)** - This permit is issued only to the **actual manufacturer or brand owner** of an ale or malt liquor. A Nonresident Brewer's Permit may only be issued to the holder of a Nonresident Seller's Permit (S). The product must be shipped by a common carrier, which holds a Carrier's Permit. The State fee is \$3,000 with a surcharge of \$376 and the permit will expire two years from the issue date. Ale or malt liquor is defined as a malt beverage containing more than 4% alcohol by weight.

**NONRESIDENT MANUFACTURER'S LICENSE (BS)** - This license is required of the **actual manufacturer or brand owner\*** of a beer product. The holder of a Nonresident Manufacturer's License may transport beer into Texas by common carrier which holds a Carrier's Permit or in motor vehicles owned or leased by the nonresident manufacturer and may only be shipped and sold to holders of a Texas Importer's License (BI). The State fee is \$1,500 with a surcharge of \$576 and the license will expire two years from the issue date. Beer is defined as a malt beverage containing  $\frac{1}{2}$  of 1% or more alcohol by volume and not more than 4% of alcohol by weight.

*\*Brand Owner - means your product is being manufactured under a contract or alternating proprietorship agreement at a brewing facility.*

## APPLICATION INSTRUCTIONS

### ALL APPLICANTS: (S, U & BS)

#### Question 1

- Check appropriate license/permit type(s).

#### Question 2

- Indicate the type of entity applying for the license/permit by checking the appropriate box.

#### Question 3

- Enter your trade name, (doing business as).

#### Question 4

- Enter the physical business location address.

#### Question 5

- Enter mailing address

**Note:** If application is being made for a foreign location, a U.S. mailing address may be provided.

#### Question 6

- Enter contact information, including an email address, **required**.

**Note:** Information may be requested via email or by phone. It is your responsibility to report any changes to your contact information to this agency.

#### Question 7

- Complete this question **only** if the applicant is applying as an individual (sole-proprietor)

#### Question 8

- Provide the name, address and contact information of your designated service agent.
- **Form L-POA**, included, **MUST** be filed with the Secretary of State prior to the approval of your application. Mail this form directly to the Secretary of State at the address located at the bottom of the form.

**Note:** Your Service Agent **must** be an individual and reside in the State of Texas.

#### Question 9

- Check the type of entity applying for the license/permit and complete the appropriate ownership page (Form L-C, L-P or L-LLC)

## **IMPORTANT INFORMATION**

### Reporting Applicant's Entity Structure

All officers, directors, stockholders and trustees (including their personal information) holding ownership in the entity applying **MUST** be reported. 100% of ownership must be disclosed down to individuals. If any shares are held by another entity, you must complete a **separate** ownership form (L-C, L-P or L-LLC) reporting all officers, directors, stockholders, trustees holding ownership in that entity. **FAILURE**, to provide required information will delay the processing of your application.

#### Question 10

- Enter name of entity or sole proprietor applying for the license/permit.

#### Question 11

- Enter applicant's Federal Employer Identification No., *if applicable*.

#### Question 12

- Answer **"Yes"**, if the applicant currently holds a license/permit under the same FEIN reported in question 11.
- If answered, "Yes" to the above question, you **must** provide your most currently issued permit number.
- If answered, "No", you must disclose 100% ownership by completing Form L-C, L-P or L-LLC

#### Question 13

- If answered "Yes", you **must** complete an ownership page (L-C, L-P or L-LLC).  
Example of Changes: change of officer(s), stockholder(s), merger, etc.)  
If, answered "No", you are **not required** to complete the ownership page (Form L-C, L-P or L-LLC).

#### Question 14

- If answered 'YES' check the type of offense. If the termination of the sentence is less than 5 years an explanation **must** be provided.

#### Question 15

- If answered 'YES' an explanation **must** be provided.

#### Question 16

- If answered 'YES' an explanation **must** be provided.

#### Question 17

- This question must be answered **'YES'** to qualify for a nonresident seller's permit (S).
- List the name of the manufacturer and brands of distilled spirits or wine being shipped into Texas.

**Note: A NONRESIDENT PERMIT (S) IS FOR WINE AND/OR DISTILLED SPIRITS ONLY. The name of the manufacturer and a list of brands is not required for beer, ale or malt liquor.**

**Nonresident Brewer's Permit (U) Applicants ONLY**  
**Questions 18 through 21 and 26 and 27**

Question 18

- Texas only recognizes the **actual manufacturer or brand owner** for ale and malt beverages over 4% alcohol content by weight. If you are **not** the importer, continue to question 17. ***If you are the importer of the ale and malt beverages products, you do not qualify for a nonresident brewer's permit (U).***

Question 19

- Mark appropriate answer.

Question 20

- If answered "**Yes**", you **must** provide the Texas permit number of the contracted brewery.

Question 21

- If answered "**Yes**", you **must** provide the Texas permit number of the brewery in which you have entered into an alternating proprietorship agreement.

**Nonresident Manufacturer's License (BS) Applicants ONLY**  
**Questions 22 through 27**

Question 22

- Texas only recognizes the **actual manufacturer or brand owner** for beer products under 4% alcohol content by weight. ***If you are the importer of ale and malt beverages you do not qualify for a nonresident manufacturer's license (BS).*** If you are **not** the importer, continue to question 21.

Question 23

- Mark appropriate answer.

Question 24

- If answered "**Yes**", you **must** provide the Texas permit number of the contracted brewery.

Question 25

- If answered "**Yes**", you **must** provide the Texas permit number of the brewery in which you have entered into an alternating proprietorship agreement.

Question 26

- If answered "**No**", a fee interest bond in the amount of \$30,000 is required **each permit type applied.**

**Note:** A bond is required if

- ✓ the applicant has a contract **or** alternating proprietorship agreement with another brewery to product their beer, ale or malt beverage product, and
- ✓ does not hold an ownership interest in **any** brewing facility

Question 27

- If “Yes”, you **must** provide the TTB number **and copy of the TTB Brewer’s Notice**.

**Acknowledgment**

- Application must be signed by an officer of the applying entity before a notary public.

**IMPORTANT:** If you, the applicant are a party to an alternating brewery proprietorship or a contract brewery arrangement, **each entity** that is a party to that arrangement/agreement must hold an additional license(s)/permit(s) at the location where brewing services are conducted.



# APPLICATION FOR NONRESIDENT SELLER'S PERMIT (S), NONRESIDENT BREWER'S PERMIT (U), AND NONRESIDENT MANUFACTURER'S LICENSE (BS)

L-NRES  
(10/2018)

All statutory and rule references mentioned in this application refer to and can be found in the Texas Alcoholic Beverage Code or Rules located on our website. [www.tabc.texas.gov/laws/code\\_and\\_rules.asp](http://www.tabc.texas.gov/laws/code_and_rules.asp)

TABC Use Only		ISSUE DATE	FEE	SURCHARGE
	<b>S</b>			
	<b>U</b>			
	<b>BS</b>			

## 1. APPLICATION FILED FOR:

- + **S** NONRESIDENT SELLER'S PERMIT (S)
- + **U** NONRESIDENT BREWER'S PERMIT (U)
- + **BS** NONRESIDENT MANUFACTURER'S LICENSE (BS)

Registry No.

## 2. APPLICATION IS FILED BY:

- + Individual + Corporation + Limited Liability Company + Other: \_\_\_\_\_
- + Partnership + Limited Partnership + Limited Liability Partnership

## 3. Trade Name of Business

## 4. Location Address

City County City/Foreign Country State Zip Code (9 digits)

## 5. Mailing Address

City/Foreign Country State Zip Code (9 digits)

6. Area Code + Business Telephone Number Area Code + Alternate Telephone Number E-mail Address

## INDIVIDUAL

7. Social Security Number Issuing State and Driver License Number Date of Birth (mm/dd/yyyy)

Full Legal Name (Last, First, Middle)

Residential Address City State Zip Code ( 9 Digits )

## ALL APPLICANTS

8. Have you filed a Power of Attorney form (L-POA) with the Texas Secretary of State as required by the Texas Alcoholic Beverage Code Section 37.05? YES NO

This form must be filed prior to the issuance of your permit.

Provide below the name, address, phone number and email of the service agent that you have on file with the Secretary of State.

Name:

Address:

Phone Number:

Email:

TABC USE ONLY	PROCESSOR REVIEW DATE	/ /	WRITTEN PROCESS DATE	/ /
	END PROCESS DATE	/ /	PROCESSOR I.D.	/ /

## BUSINESS OWNERSHIP

You must provide the entire ownership including all necessary ownership forms. Select the entity page(s) that coincides with your business structure. All officers, directors, stockholders, trustees, and beneficiaries holding ownership in this business must be disclosed. Use the following forms to report your business structure:

- L-C (Corporation, Trust, City, County or University)
- L-LLC (Limited Liability Company)
- L-P (Partnership)

### 9. Type of Owner/Applicant

Individual	Limited Partnership	City/County/University
Corporation	Limited Liability Partnership	Other _____
Limited Liability Company	Trust	
Partnership	Joint Venture	

### 10. Owner of Business/Applicant

### 11. Federal Employer Identification No. (FEIN) (if applicable)

12. Do you hold a current license/permit issued under the above FEIN? Yes No  
If **"YES,"** provide your most recently issued license/permit number.  
If **"NO,"** you must provide your entire ownership on the applicable business structure form(s) (L-C, L-LLC, L-P).

13. If you hold a current license/permit under the above FEIN has there been a change in the ownership or business structure since the submission of your last application? Yes No  
If **"YES,"** you must complete this application in its entirety.  
If **"NO,"** you do not need to report your business ownership on form(s) L-C, L-P or L-LLC.

## BUSINESS INFORMATION

14. Has any person listed in this application, or his or her spouse, been finally convicted or received deferred adjudication for any of the following offenses? Yes No

If **"YES,"** indicate type of offense and attach an explanation:

- ☐ any felony offense
- ☐ prostitution
- ☐ bookmaking
- ☐ gambling or gaming
- ☐ bootlegging
- ☐ vagrancy offense involving moral turpitude
- ☐ any offense involving dangerous drugs, synthetic cannabinoids or controlled substances as defined in Texas Controlled Substances Act
- ☐ any offense involving firearms or a deadly weapon
- ☐ more than three violations of the Texas Alcoholic Beverage Code relating to minors
- ☐ violations of the Texas Alcoholic Beverage Code resulting in a criminal fine of \$500
- ☐ violations of an individual's civil rights or discrimination against an individual on the basis or race, color, creed or national origin

If **"YES,"** has it been five years since the termination of a sentence, parole or probation served for any offenses indicated above? Yes No

If **"NO,"** attach an explanation.

15. Has any person listed in this application, or his or her spouse, had a cancellation of a license or permit in the past five years? Yes No

If **"YES,"** attach an explanation.

## ALL APPLICANTS

The applicant, license/permit holder, agent, servant or employee may not directly or indirectly have any overlapping ownerships or other prohibited relationships (including unfair competition and unlawful trade practices) between those engaged in the alcoholic beverage industry at different levels, that is, between a manufacturer and a wholesaler or retailer, or between a wholesaler and a retailer, as the words "wholesaler," "retailer," and "manufacturer" are ordinarily used and understood, regardless of the specific names given a license/permit. Reference Chapter 102 et seq.

16. Is any person, involved in this application, in violation of the above requirements? **YES NO**  
If "YES," attach an explanation.

## FOR NONRESIDENT SELLER'S PERMIT (S) (Distilled Spirits and Wine)

Chapter 37

**NOTE:** Section 37.10(a), (b), and (c) provides:

" (a) No holder of a nonresident seller's permit may solicit, accept, or fill an order for distilled spirits or wine from a holder of any type of wholesaler's or winery permit unless the nonresident seller is the primary source for the brand of distilled spirits or wine that is ordered.

(b) In this section, "primary American source of supply" means the distiller, the producer, the owner of the commodity at the time it becomes a marketable product, the bottler, or the exclusive agent of any of those. To be the "primary American source of supply" the nonresident seller must be the first source, that is the manufacturer or the source closest to the manufacturer, in the channel of commerce from whom the product can be secured by Texas wholesalers and Texas wineries. Except as provided by Subsection (c), a product may have only one primary American source of supply to Texas.

(c) A product may have more than one primary American source of supply to Texas if the product is a wine that is bottled or produced outside of the United States."

17. Is the applicant "the primary American source of supply" for any brands of distilled spirits or wine within the meaning of Section 37.10(a), (b), and (c) of the Texas Alcoholic Beverage Code? **17. YES NO**  
If "YES," specify the manufacturer and brands of distilled spirits and/or wine.  
(If more space is needed, attach a page.)

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## FOR NONRESIDENT BREWER'S PERMIT (U) (Malt greater than 4% of alcohol by weight)

Chapter 13

18. Are you, the applicant, the importer of the ale to be shipped into Texas? **18. + YES + NO**  
If "YES," **STOP**. You do not qualify to hold this permit. Permit must be held by the brand owner or actual manufacturer.
19. Are you, the applicant, the actual manufacturer of the ale to be shipped into Texas? **19. + YES + NO**
20. Do you, the applicant, contract with another brewery to produce your ale product? **20. + YES + NO**  
If "YES," provide TABC License/Permit number of that brewery. \_\_\_\_\_  
Is your product brewed at their location? **YES NO**
21. Do you, the applicant, utilize an alternating proprietorship agreement to produce ale product? **21. + YES + NO**  
If "YES," provide TABC License/Permit number of that brewery. \_\_\_\_\_  
Is your product brewed at their location? **YES NO**



**FOR NONRESIDENT MANUFACTURER'S LICENSE (BS)****(Malt 4% or less of alcohol by weight)**

Chapter 63

- 22.** Are you, the applicant, the importer of the beer to be shipped into Texas? **22. + YES + NO**  
If **"YES," STOP.** You do not qualify to hold this permit. Permit must be held by the brand owner or actual manufacturer.
- 23.** Are you, the applicant, the actual manufacturer of beer to be imported into the State of Texas? **23. + YES + NO**
- 24.** Do you, the applicant contract with another brewery to produce beer product? **24. + YES + NO**  
If **"YES,"** provide the TABC license/permit number of that brewery. \_\_\_\_\_  
Is your product brewed at their location? **+ YES + NO**
- 25.** Do you, the applicant, utilize an alternating proprietorship agreement to produce beer product? **25. + YES + NO**  
If **"YES,"** provide TABC license/permit number of that brewery. \_\_\_\_\_  
Is your product brewed at their location? **+ YES + NO**

**FOR NONRESIDENT BREWER'S PERMIT (U) AND NONRESIDENT MANUFACTURER'S LICENSE (BS)**

- 26.** If questions 18, 19, 22 and/or 23 were answered **"YES,"** do you, the applicant, own a fee interest (ownership) in a brewing facility? **26. + YES + NO**  
If **"NO,"** please submit a Fee Interest Bond which must be on file and approved to issue your renewal.  
**Fee Interest Bond** form and instructions can be downloaded from <http://www.tabc.texas.gov/forms/>
- 27.** Do you, the applicant, hold a Brewer's Notice issued by the Alcohol and Tobacco Tax and Trade Bureau of the United States Department of the Treasury? **27. + YES + NO**  
If **"YES,"** provide TTB Brewers Notice Number \_\_\_\_\_ and **attach copy.**

**WARNING:** Section 101.69 of the Texas Alcoholic Beverage Code is as follows: "...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."

**ACKNOWLEDGMENT**

If Applicant is:	Who Must Sign:	PRINT NAME: _____
Individual	Individual Owner	NAME MUST APPEAR AS NAME SHOWN IN QUESTION 7 OR 10.
Partnership	Partner	<b>SIGN HERE:</b> _____
Corporation	Officer	SIGNATURE MUST APPEAR AS NAME SHOWN IN QUESTION 7 OR 10.
Limited Partnership	General Partner	Before me, the undersigned authority, on this _____
Limited Liability Partnership	General Partner	day
Limited Liability Company	Officer or Manager	of _____, 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 read the said application and that all the facts therein set forth are true and correct.
<b>(S E A L)</b>		<b>SIGN HERE:</b> _____ NOTARY PUBLIC



## POWER OF ATTORNEY DESIGNATING SERVICE AGENT

L-POA  
(01/2018)

KNOW ALL MEN BY THESE PRESENTS:

I, \_\_\_\_\_, as owner/partner/manager/officer of  
(Individual's Name)  
\_\_\_\_\_ located at \_\_\_\_\_  
(Trade Name of Business) (Address)  
\_\_\_\_\_, \_\_\_\_\_  
(City) (State/Country)  
appoint \_\_\_\_\_ of \_\_\_\_\_  
(Name of Service Agent) (Name of Business/Employer)  
located at \_\_\_\_\_, \_\_\_\_\_ Texas,  
(Address) (City)  
a resident of Texas, as my service agent in Texas, as required by the Texas Alcoholic Beverage Code; upon whom notice of a hearing may be served concerning matters, proceedings, hearings and causes involving the refusal, cancellation or suspension of a permit or license issued by the Texas Alcoholic Beverage Commission for the above described entity.

**SIGN  
HERE:**

Applicant

### ACKNOWLEDGMENT

BEFORE ME, the undersigned authority, on this the \_\_\_\_\_ day of \_\_\_\_\_  
A.D., \_\_\_\_\_ the person whose name is subscribed to the foregoing instrument as owner, partner, manager or officer personally appeared and acknowledged to me that the matters stated therein are true and that this form was executed for the purpose and consideration therein expressed.

**SIGN  
HERE:**

Notary Public

**S E A L**

### INSTRUCTIONS

1. To obtain a Nonresident Seller's Permit, Nonresident Brewer's Permit or a Nonresident Manufacturer's License, the applicant must file this form with the Texas Secretary of State designating a Texas resident, 18 years or older, as service agent.
2. Your appointed service agent may be a representative of the distributor/wholesaler licensed in the State of Texas.
3. A change in service agent must be reported to this commission within 10 days of the change. Failure to do so may result in administrative action against your permit/license.
4. **The original of this form should be mailed directly to the Secretary of State, Statutory Document Section, P.O. Box 12079, Austin, Texas 78711-2079.**



## CORPORATION

L-C  
(01/2018)

**This Corporation form should be completed for original applications or for changes of officers, directors, stockholders, trustees, and beneficiaries holding ownership in this business. This form is included in the Business Packet (L-B) for new applicants. License/Permit holders reporting changes use Business Packet for Reporting Changes (L-BRC).**

**For more information contact your local TABC office or visit us at: [www.tabc.texas.gov](http://www.tabc.texas.gov)**

### ENTITY INFORMATION

1. Federal Employer Identification Number (FEIN)

2. Business Entity Name

3. Filing Number

4. Date Filed (mm/dd/yyyy)

State

Class and Number of Shares Issued

### CORPORATE OWNERSHIP INFORMATION

☐ Officer ☐ Director ☐ Stockholder ☐ Trustee ☐ Beneficiary

SSN ☐ Out of Country Issuing State/DL No. Date of Birth (mm/dd/yyyy) Class & No. of Shares

Last Name

First Name

MI

Title

☐ Officer ☐ Director ☐ Stockholder ☐ Trustee ☐ Beneficiary

SSN ☐ Out of Country Issuing State/DL No. Date of Birth (mm/dd/yyyy) Class & No. of Shares

Last Name

First Name

MI

Title

☐ Officer ☐ Director ☐ Stockholder ☐ Trustee ☐ Beneficiary

SSN ☐ Out of Country Issuing State/DL No. Date of Birth (mm/dd/yyyy) Class & No. of Shares

Last Name

First Name

MI

Title

☐ Officer ☐ Director ☐ Stockholder ☐ Trustee ☐ Beneficiary

SSN ☐ Out of Country Issuing State/DL No. Date of Birth (mm/dd/yyyy) Class & No. of Shares

Last Name

First Name

MI

Title

**CORPORATE OWNERSHIP INFORMATION** *CONTINUED*

<input type="checkbox"/> Officer <input type="checkbox"/> Director <input type="checkbox"/> Stockholder <input type="checkbox"/> Trustee <input type="checkbox"/> Beneficiary				
SSN <input type="checkbox"/> Out of Country	Issuing State/DL No.	Date of Birth (mm/dd/yyyy)	Class & No. of Shares	
Last Name		First Name	MI	Title

<input type="checkbox"/> Officer <input type="checkbox"/> Director <input type="checkbox"/> Stockholder <input type="checkbox"/> Trustee <input type="checkbox"/> Beneficiary				
SSN <input type="checkbox"/> Out of Country	Issuing State/DL No.	Date of Birth (mm/dd/yyyy)	Class & No. of Shares	
Last Name		First Name	MI	Title

<input type="checkbox"/> Officer <input type="checkbox"/> Director <input type="checkbox"/> Stockholder <input type="checkbox"/> Trustee <input type="checkbox"/> Beneficiary				
SSN <input type="checkbox"/> Out of Country	Issuing State/DL No.	Date of Birth (mm/dd/yyyy)	Class & No. of Shares	
Last Name		First Name	MI	Title

<input type="checkbox"/> Officer <input type="checkbox"/> Director <input type="checkbox"/> Stockholder <input type="checkbox"/> Trustee <input type="checkbox"/> Beneficiary				
SSN <input type="checkbox"/> Out of Country	Issuing State/DL No.	Date of Birth (mm/dd/yyyy)	Class & No. of Shares	
Last Name		First Name	MI	Title

<input type="checkbox"/> Officer <input type="checkbox"/> Director <input type="checkbox"/> Stockholder <input type="checkbox"/> Trustee <input type="checkbox"/> Beneficiary				
SSN <input type="checkbox"/> Out of Country	Issuing State/DL No.	Date of Birth (mm/dd/yyyy)	Class & No. of Shares	
Last Name		First Name	MI	Title

<input type="checkbox"/> Officer <input type="checkbox"/> Director <input type="checkbox"/> Stockholder <input type="checkbox"/> Trustee <input type="checkbox"/> Beneficiary				
SSN <input type="checkbox"/> Out of Country	Issuing State/DL No.	Date of Birth (mm/dd/yyyy)	Class & No. of Shares	
Last Name		First Name	MI	Title

<input type="checkbox"/> Officer <input type="checkbox"/> Director <input type="checkbox"/> Stockholder <input type="checkbox"/> Trustee <input type="checkbox"/> Beneficiary				
SSN <input type="checkbox"/> Out of Country	Issuing State/DL No.	Date of Birth (mm/dd/yyyy)	Class & No. of Shares	
Last Name		First Name	MI	Title

**IF YOU NEED MORE SPACE USE ADDITIONAL COPIES OF THIS PAGE**



## LIMITED LIABILITY COMPANY

L-LLC  
(01/2018)

This Limited Liability Company form should be completed for original applications or for changes of officers, managers, and members holding ownership in this business. This form is included in the Business Packet (L-B) for new applicants. License/Permit holders reporting changes use the Business Packet for Reporting Changes (L-BRC). For individuals outside the United States, not holding a social security number check the "Out of Country" box.

For more information contact your local TABC office or visit us at: [www.tabc.texas.gov](http://www.tabc.texas.gov)

### ENTITY INFORMATION

1. Federal Employer Identification Number (FEIN)

2. Business Entity Name

3. Filing Number

4. Member Managed or Manager Managed

☐ Member Managed ☐ Manager Managed

5. Date Filed (mm/dd/yyyy)

State

Class and Number of Memberships or Units Issued

### LIMITED LIABILITY COMPANY OWNERSHIP INFORMATION

☐ Officer ☐ Manager ☐ Member

SSN ☐ Out of Country

Issuing State/DL No.

Date of Birth (mm/dd/yyyy)

Membership or Units Held

Last Name

First Name

MI

Title

☐ Officer ☐ Manager ☐ Member

SSN ☐ Out of Country

Issuing State/DL No.

Date of Birth (mm/dd/yyyy)

Membership or Units Held

Last Name

First Name

MI

Title

☐ Officer ☐ Manager ☐ Member

SSN ☐ Out of Country

Issuing State/DL No.

Date of Birth (mm/dd/yyyy)

Membership or Units Held

Last Name

First Name

MI

Title

☐ Officer ☐ Manager ☐ Member

SSN ☐ Out of Country

Issuing State/DL No.

Date of Birth (mm/dd/yyyy)

Membership or Units Held

Last Name

First Name

MI

Title

**LIMITED LIABILITY COMPANY OWNERSHIP INFORMATION** *CONTINUED*☐ Officer ☐ Manager ☐ MemberSSN ☐ Out of Country Issuing State/DL No. Date of Birth (mm/dd/yyyy) Membership or Units Held

Last Name First Name MI Title

☐ Officer ☐ Manager ☐ MemberSSN ☐ Out of Country Issuing State/DL No. Date of Birth (mm/dd/yyyy) Membership or Units Held

Last Name First Name MI Title

☐ Officer ☐ Manager ☐ MemberSSN ☐ Out of Country Issuing State/DL No. Date of Birth (mm/dd/yyyy) Membership or Units Held

Last Name First Name MI Title

☐ Officer ☐ Manager ☐ MemberSSN ☐ Out of Country Issuing State/DL No. Date of Birth (mm/dd/yyyy) Membership or Units Held

Last Name First Name MI Title

☐ Officer ☐ Manager ☐ MemberSSN ☐ Out of Country Issuing State/DL No. Date of Birth (mm/dd/yyyy) Membership or Units Held

Last Name First Name MI Title

☐ Officer ☐ Manager ☐ MemberSSN ☐ Out of Country Issuing State/DL No. Date of Birth (mm/dd/yyyy) Membership or Units Held

Last Name First Name MI Title

☐ Officer ☐ Manager ☐ MemberSSN ☐ Out of Country Issuing State/DL No. Date of Birth (mm/dd/yyyy) Membership or Units Held

Last Name First Name MI Title

**IF YOU NEED MORE SPACE USE ADDITIONAL COPIES OF THIS PAGE**



## PARTNERSHIP

L-P  
(01/2018)

This Partnership form should be completed for original applications or for changes of partnerships, limited partnerships, limited liability partnerships, and joint ventures holding ownership in this business. This form is included in the Business Packet (L-B) for new applicants. License/Permit holders reporting changes use Business Packet for Reporting Changes (L-BRC). For individuals outside the United States, not holding a social security number check the "Out of Country" box.

For more information contact your local TABC office or visit us at: [www.tabc.texas.gov](http://www.tabc.texas.gov)

### ENTITY INFORMATION

1. Federal Employer Identification Number (FEIN).

2. Business Entity Name

3. Filing Number

4. Date Filed (mm/dd/yyyy)

State

### PARTNERSHIP INFORMATION

☐ General Partner ☐ Limited Partner

SSN	Out of Country	Issuing State/DL No.	Date of Birth (mm/dd/yyyy)	Percent of Interest
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Last Name	First Name	MI	Title
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☐ General Partner ☐ Limited Partner

SSN	Out of Country	Issuing State/DL No.	Date of Birth (mm/dd/yyyy)	Percent of Interest
-----	----------------	----------------------	----------------------------	---------------------

Last Name	First Name	MI	Title
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☐ General Partner ☐ Limited Partner

SSN	Out of Country	Issuing State/DL No.	Date of Birth (mm/dd/yyyy)	Percent of Interest
-----	----------------	----------------------	----------------------------	---------------------

Last Name	First Name	MI	Title
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☐ General Partner ☐ Limited Partner

SSN	Out of Country	Issuing State/DL No.	Date of Birth (mm/dd/yyyy)	Percent of Interest
-----	----------------	----------------------	----------------------------	---------------------

Last Name	First Name	MI	Title
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**PARTNERSHIP INFORMATION *CONTINUED***☐ General Partner ☐ Limited Partner

SSN      Out of Country      Issuing State/DL No.      Date of Birth (mm/dd/yyyy)      Percent of Interest

Last Name

First Name

MI

Title

☐ General Partner ☐ Limited Partner

SSN      Out of Country      Issuing State/DL No.      Date of Birth (mm/dd/yyyy)      Percent of Interest

Last Name

First Name

MI

Title

☐ General Partner ☐ Limited Partner

SSN      Out of Country      Issuing State/DL No.      Date of Birth (mm/dd/yyyy)      Percent of Interest

Last Name

First Name

MI

Title

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