TEXAS ALCOHOLIC BEVERAGE COMMISSION
Texans Helping Businesses & Protecting Communities

AUTHORIZATION TO FILL IN APPLICATION OR INFORMATION

NOTICE: The applicant or permittee account holder is legally responsible for the actions of any person given access to the permittee account holder's AIMS online account or authorization to fill in and submit any application or other information.

Printed name and **signature** of person filling out this form: *

Printed name: _____ Signature:

Title or position:

_____

I am either:

- the individual applicant or permittee account holder, or
- the principal party legally authorized to apply for a permit or license on behalf of a business entity which is the applicant or permittee account holder, and

☐ I hereby authorize the following person or firm to fill out applications on my behalf:

☐ I hereby cancel the previous authorization for the following person or firm to fill out applications on my behalf:

Name of person or firm: *

_____

Full mailing address: *

_____

Email address: *

_____

Phone number: *

_____

* Required field