

STATE OF RHODE ISLAND

WARWICK

BOARD OF LICENSING COMMISSIONERS

APPLICATION FOR TRANSFER OF BEVERAGE LICENSE

Retailer Class: A__BH__BM__BT__BV__BVL__C__D__DL__E__J__T__

Transfer of: Location_____ Name _____ Stock_____

FROM: Transferor (Corp. Name)

TO: Name of Transferee (New Applicant)

_____ Telephone #_____

D/B/A _____

Address_____

New Location: (if any) _____

New Name: (if any) _____

If Change of Stockholder's List the

OLD

NEW

Signature of Transferor

Date

Signature of Transferee

Date

Notary

Commission Expires

The Board of Commissioners has set a hearing date of _____ and time of 7 p.m. in the Board of Public Safety Room, Warwick Police Department, 99 Veterans Memorial Dr., Warwick, RI on this petition and ordered the same to be duly advertised.