# PRIORITY LICENSE APPLICATION – LIMITED PARTNERSHIP (ATTACHMENT C)

APPLICANT INFOR	MATION: This	s form is intended	l as an attachmen	t to the A	BC-521 fo	orm. This is	not a star	ndalone
priority application. \	ou must comp	olete and submit	this attachment al	ong with	your com	pleted prior	ity license	application.

- 1. Limited Partnership Name
- 2. Limited Partnership CA Secretary of State ID #
- 3. List All General Partners (sum of ownership between General and Limited Partners must total 100%)

Individuals: Complete Printed Name, DOB, and SSN or Driver's License # or State-Issued ID # or Passport #. Entities: Complete Printed Name, Date of Incorporation or Establishment of the Entity, and CA Secretary of State ID #. If the general partner is a trust, provide the trustee information.

(Write N/A in each row where the column does not apply.)

Printed Name	DOB (mm/dd/yyyy)	SSN (last 4) or Driver's License # or State-Issued ID # or Passport #	Date of Incorporation or Establishment of the Entity (mm/dd/yyyy)	CA Secretary of State ID #	Ownership %

4. List All Limited Partners (sum of ownership between General and Limited Partners must total 100%)

Individuals: Complete Printed Name, DOB, and SSN or Driver's License # or State-Issued ID # or Passport #. Entities: Complete Printed Name, Date of Incorporation or Establishment of the Entity, and CA Secretary of State ID #. If the limited partner is a trust, provide trustee information.

(Write N/A in each row where the column does not apply.)

Printed Name	DOB (mm/dd/yyyy)	SSN (last 4) or Driver's License # or State-Issued ID # or Passport #	Date of Incorporation or Establishment of the Entity (mm/dd/yyyy)	CA Secretary of State ID #	Ownership %

### PRIORITY LICENSE APPLICATION - LIMITED PARTNERSHIP (ATTACHMENT C) (continued)

#### **ITEM INSTRUCTIONS:**

Item 1 (Limited Partnership Name) – Enter the name of the limited partnership.

**Item 2 (Limited Partnership CA Secretary of State ID #)** – Enter the limited partnership state business identification number from the Secretary of State.

### Item 3 (List All General Partners)

Individuals: Complete Printed Name, DOB, and SSN or Driver's License # or State-Issued ID # or Passport #. Entities: Complete Printed Name, Date of Incorporation or Establishment of the Entity, and CA Secretary of State ID #. If the general partner is a trust, provide the trustee information.

(Write **N/A** in each row where the column does not apply.)

The sum of ownership between General and Limited partners must total 100%.

- Printed Name The full legal name of the person or entity with ownership
- DOB The general partner's date of birth if the general partner is an individual (not required for an entity)
- SSN (last 4) **or** Driver's License # **or** State-Issued ID # **or** Passport # The general partner's last four digits of their social security number (SSN) **or** driver's license **or** state-issued identification number **or** passport number, if the general partner is an individual (not required for an entity)
- Date of Incorporation or Establishment of the Entity (mm/dd/yyyy) The general partner's date of incorporation or
  establishment of the entity, if the general partner is an entity (not required for individuals)
- CA Secretary of State ID # The general partner's state business identification number from the Secretary of State, if the general partner is an entity (not required for individuals)
- Ownership % The general partner's ownership percentage

## Item 4 (List All Limited Partners)

Individuals: Complete Printed Name, DOB, and SSN or Driver's License # or State-Issued ID # or Passport #. Entities: Complete Printed Name, Date of Incorporation or Establishment of the Entity, and CA Secretary of State ID #. If the limited partner is a trust, provide the trustee information.

(Write N/A in each row where the column does not apply.)

The sum of ownership between General and Limited partners must total 100%.

- Printed Name The full legal name of the person or entity with ownership
- DOB The limited partner's date of birth if the limited partner is an individual (not required for an entity)
- SSN (last 4) **or** Driver's License # **or** State-Issued ID # **or** Passport # The limited partner's last four digits of their social security number (SSN) **or** driver's license **or** state-issued identification number **or** passport number, if the limited partner is an individual (not required for an entity)
- Date of Incorporation or Establishment of the Entity (mm/dd/yyyy) The limited partner's date of incorporation or
  establishment of the entity, if the limited partner is an entity (not required for individuals)
- CA Secretary of State ID # The limited partner's state business identification number from the Secretary of State, if the limited partner is an entity (not required for individuals)
- Ownership % The limited partner's ownership percentage.