

APPLICATION FOR NEIGHBORHOOD-RESTRICTED SPECIAL ON-SALE GENERAL LICENSE (TYPE 87) – LIMITED LIABILITY COMPANY (ATTACHMENT E)

APPLICANT INFORMATION: This form is intended as an attachment to the [ABC-522](#) form. This is not a standalone priority application. You must complete and submit this attachment along with your completed priority license application.

1. Limited Liability Company Name

2. Limited Liability Company CA Secretary of State ID #

3. List All Managers and/or Officers

Individuals: Complete Printed Name and Title, 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 manager or the officer is a **trust**, provide the trustee information.
 (Write **N/A** in each row where the column does not apply.)

Printed Name and Title	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 #

4. List All Members (must total to 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 member 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 %

APPLICATION FOR NEIGHBORHOOD-RESTRICTED SPECIAL ON-SALE GENERAL LICENSE (TYPE 87) – LIMITED LIABILITY COMPANY (ATTACHMENT E) (continued)

ITEM INSTRUCTIONS:

Item 1 (Limited Liability Company Name) – Enter the name of the limited liability company.

Item 2 (Limited Liability Company CA Secretary of State ID #) – Enter the limited liability company state business identification number from the Secretary of State.

Item 3 (List All Managers and/or Officers)

Individuals: Complete Printed Name and Title, 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 manager or the officer is a **trust**, provide the trustee information.

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

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

Item 4 (List All Members)

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 member is a **trust**, provide the trustee information.

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

The sum of members' ownership must total to 100%.

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