

**APPLICATION FOR NEIGHBORHOOD-RESTRICTED SPECIAL ON-SALE GENERAL LICENSE (TYPE 87) – TRUSTS (ATTACHMENT F)**

**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. Trust Name

2. Date of Trust

3. List all controlling individuals, trustees, and beneficiaries

**Individuals:** Complete Printed Name, 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 #.

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

Printed Name	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 #

**APPLICATION FOR NEIGHBORHOOD-RESTRICTED SPECIAL ON-SALE GENERAL LICENSE (TYPE 87) – TRUSTS (ATTACHMENT F) (continued)****ITEM INSTRUCTIONS:**

**Item 1 (Trust Name)** – Enter the name of the Trust.

**Item 2 (Date of Trust)** – Enter the date of the Trust.

**Item 3 (List all controlling individuals, trustees, and beneficiaries)**

**Individuals:** Complete Printed Name, 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 #.

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

- Printed Name – The full legal name of the person or entity
- Title – The title of the person or entity
- DOB – The date of birth of 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 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 an entity (not required for individuals)
- CA Secretary of State ID # – The state business identification number from the Secretary of State, if an entity (not required for individuals)