

AUTHORITY TO RELEASE INFORMATION

Application filled by Applicant – A, Stockholder/Partner – S: _____

TO WHOM IT MAY CONCERN:

I understand that the Alcoholic Beverage Control Enforcement Division will conduct a thorough investigation before a final decision is made regarding my eligibility to hold an alcoholic beverage permit. This investigation may include inquiries as to my character, reputation, and the location and feasibility of a permit being issued at the applied for location.

To facilitate this investigation, I do hereby give my consent and authority for any public utility or police agency to furnish information from their records to the Alcoholic Beverage Control Enforcement Division and the Alcoholic Beverage Control Board.

Signature – Full Name

Print Name

Home Address

City State Zip

Mailing Address

City State Zip

Contact Phone Business Phone

Email Address

Sworn and subscribed before me this _____ day of _____, _____.

Notary Public

My Commission Expires: _____