**ALCOHOL AND GAMING DIVISION** ANNUAL RENEWAL FEE: $1,300.00

Regulation and Licensing Department SUNDAY SALES BY THE DRINK FEE: $100.00

PO Box 25101 SUNDAY SALES BY THE PACKAGE FEE: $100.00

Santa Fe, New Mexico 87504-5101 \*\* If Local Option District allows for the Sunday Sales\*\*

(505) 476-4875 ***ALL FEES ARE NON-REFUNDABLE***

**APPLICATION & FEE(S) DUE april 1, 2017**

**2017-2018 DISPENSER TYPE LIQUOR LICENSE RENEWAL APPLICATION**

Division records reflect the following information for **License No. \_\_\_\_\_\_\_\_\_\_\_\_\_**

**OWNER NAME AND ADDRESS BUSINESS TRADE NAME AND ADDRESS**

Owners Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Business Phone: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Fax No: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

E-Mail Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**License Owner** New Mexico State Tax ID (NMCRS) Number:

Resident Agent for this license is: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

This license is leased to: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**LESSEE** New Mexico State Tax ID (CRS) Number:

This liquor license establishment is a (check type):

Package Store \_\_\_ Package Liquor & Grocery\_\_\_ Lounge \_\_\_ Restaurant \_\_\_

Hotel \_\_\_Racetrack \_\_\_ Other \_\_\_\_\_

Licensee requests a Sunday Sales by the Drink Permit: Yes\_\_\_\_\_\_ No\_\_\_\_\_ (If Applicable)

Licensee requests a Sunday Package Sales Permit: Yes\_\_\_\_\_\_ No\_\_\_\_\_ (If Applicable)

#### Applicable Fees are listed above.

List any corrections or changes necessary to update Licensee information. Attach additional pages if necessary:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

#### NOTE: ALL CORPORATIONS MUST BE IN GOOD STANDING WITH THE NEW MEXICO

#### SECRETARY OF STATE’S OFFICE

**MANDATORY EMAIL ADDRESS:** Renewal Applications now sent by email. If an email address is not provided, Licensee is responsible for contacting the Division for Renewal and if application packet is received after due date, Late Fees will be applied.

**\*\*\*RETAIN COPY OF SIGNED RENEWAL ON PREMISES\*\*\***

**FOR INSPECTION UPON REQUEST BY SPECIAL AGENT**

State of New Mexico |Alcohol and Gaming Division **License No.:** **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Licensee affirms under penalty of perjury that the ownership interests in this license are accurately stated on the application and transfer records filed by the licensee with the division. I have read the information in this application and swear under penalty of perjury that the information contained herein is true and correct.**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, hereby swear and affirm upon my oath that I am qualified by virtue of the fact that my fingerprints are on file with the Alcohol and Gaming Division. I further swear and affirm upon my oath that:

1. I understand that the Liquor Control Act defines a “server” as an individual who sells, serves, or dispenses alcoholic beverages for consumption on or off the licensed premises, including persons who manage, direct or control the sale or service of alcohol;
2. Licensee, his lessee, if any and each “server” employed by the licensee or lessee during the prior licensing year have or had valid server permits at all times that alcoholic beverages were sold, served or dispensed;
3. I have attached a true and correct list which details the name of the licensee, his lessee, if any, and each server employed by that licensee or lessee during the prior licensing year, including their social security number, server permit number, permit expiration date, date of hire, and termination date if applicable;
4. I understand that the list I have attached may be audited by the Alcohol and Gaming Division and that any false representation or omission may result in the imposition of fines and the suspension or revocation of the liquor license. I also understand that any false representation or omission may lead to prosecution for perjury by the New Mexico Attorney General.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

AUTHORIZED SIGNATURE TITLE

STATE OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

SS **SEAL**

COUNTY OF \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_)

SUBSCRIBED AND SWORN TO before me this \_\_\_\_\_\_\_\_\_\_ day of \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_, 20\_\_\_\_\_,

by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

NOTARY PUBLIC My Commission expires:

\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*\*

**AGD USE ONLY |**Renewal Validation

REN: $\_\_\_\_\_\_\_\_\_\_ |SSPKG $\_\_\_\_\_\_\_\_\_\_ |SSDRK $\_\_\_\_\_\_\_\_\_\_ |LREN $\_\_\_\_\_\_\_\_\_\_

LLREN $\_\_\_\_\_\_\_\_\_\_ |LASF $\_\_\_\_\_\_\_\_\_\_ |NSF $\_\_\_\_\_\_\_\_ (replacement) |NSFF $\_\_\_\_\_\_\_\_\_ ($25.00)