



Liquor Control and Licensing Branch
 4th Floor, 3350 Douglas St, Victoria, BC V8W 9J8
 Mail: PO Box 9292 Stn Provincial Govt, Victoria, BC V8W 9J8
 Phone: 1 866 209-2111 Fax: 250-952-7066

UVIN AND UBREW (FERMENT-ON- PREMISES) TRANSFER OF LOCATION LICENCE APPLICATION

Liquor Control and Licensing Form LCLB093

Instructions:

Complete all applicable fields, attach required documents and submit with payment as outlined in Part 4. You may complete this form, one of two ways: 1) at your computer, save and then print; or 2) by hand - print clearly using dark ink.

- If you have any questions about completing this application, call the Branch toll-free at 1 866-209-2111
- LCLB forms and supporting materials can be found at: www.gov.bc.ca/liquorregulationandlicensing

Note: Your complete application package must contain this application form with responses in all the applicable fields, all the required documentation and the full fee. If your application is submitted incomplete, it will cause a delay in processing.

Part 1: Application Contact Information

The applicant authorizes the person below to be the primary contact for the duration of the application process only.

Name: Phone number:

Fax number: E-mail address:

Part 2: Licensee Information

Office use only
 C2 - LIC
 Job No.

Licence Number:

Licensee Name:
(As on licence)

Mailing address (all correspondence will be sent to this address unless otherwise indicated):

Street City Province Postal Code

Tel: Fax: E-mail:

Part 3: Establishment Information

Current Location Information

Current establishment name:

Current licence name, if different from above:

Current Street Address:
Street City Province Postal Code

Proposed Location Information

Proposed new name (if any):

Note: Establishment/licence name changes and changes to signs, menus, awnings, advertising, etc. are subject to approval by the Liquor Control and Licensing Branch.

Proposed street address:
Street City Province Postal Code

Local Government or First Nation: Local police jurisdiction:

Establishment Phone # with area code and extension: Establishment fax with area code:

Legal description of proposed site:

(Legal description and parcel identifier (PID) or Strata Plan number of the establishment site, found on property tax notice or from Land Titles office)

Part 3: Declaration of Signing Authority Including Valid Interest

Section 57(1)(c) of the *Liquor Control and Licensing Act* states: "A person commits an offence if the person (c) provides false or misleading information in the following circumstances: (i) when making an application referred to in section 12; (ii) when making a report or when required and as specified by the general manager under section 59".

As the licensee or authorized signatory of the licensee, I understand and affirm that all of the information provided is true and complete.

Signature: _____

Authorized signatory of the licensee

Name:

(last / first / middle)

Position:

(if not an individual)

Date:

(Day/Month/Year)

Note: An agent, lawyer or third party operator may not sign the declaration on behalf of the licensee.

This form should be signed by an individual with the authority to bind the applicant. The Branch relies on the licensee to ensure that the individual who signs this form is authorized to do so. Typically, an appropriate individual will be as follows:

- If the licensee is an individual or sole proprietor, the individual himself/herself
- If the licensee is a corporation, a duly authorized signatory who will usually be an officer or, in some cases, a director
- If the licensee is a general partnership, one of the partners
- If the licensee is a limited partnership, the general partner of the partnership
- If the licensee is a society, then a director or a senior manager (as defined in the *Societies Act*)

If an authorized signatory has completed the *Add, Change or Remove Licensee Representative* form (LCLB101) and they have specifically permitted a licensee representative to sign this form on the licensee's behalf, the branch will accept the licensee representative's signature.

Part 4: Application Fee \$220 (non-refundable)

In accordance with Payment Card Industry Standards, the branch is no longer able to accept credit card information via email.

Payment is by (check one):

- Cheque, payable to Minister of Finance (if cheque is returned as non-sufficient funds, a \$30 fee will be charged)
- Money order, payable to Minister of Finance
- Credit card: VISA MasterCard AMEX
- I am submitting my application by email and I will call with my credit card information. I will call Victoria Head Office at 250-952-5787 or 1-866-209-2111 and understand that no action can proceed with my application until the application fee is paid in full.
- I am submitting my application by fax or mail and have given my credit information in the space provided at the bottom of the page.

Part 5: What Happens Next?

The UVin/UBrew Licence transfer of location application and approval process.

1. The applicant must submit a complete application package and fees to the Victoria Liquor Control and Licensing Branch head office.
2. The Liquor Control and Licensing Branch (LCLB) staff will review the application for completeness and will advise the applicant by phone or mail, of any information required before the application can be considered complete.
3. Once the application is complete, the applicant will be asked to contact the local liquor inspector for a final inspection.
4. When Victoria LCLB receives the final inspection report and any outstanding issues are resolved an amended licence will be issued.

The information requested on this form is collected by the Liquor Control and Licensing Branch under Section 26 (a) and (c) of the *Freedom of Information and Protection of Privacy Act* and will be used for the purpose of liquor licensing and compliance and enforcement matters in accordance with the *Liquor Control and Licensing Act*. Should you have any questions about the collection, use, or disclosure of personal information, please contact the Freedom of Information Officer at PO Box 9292 STN PROV GVT, Victoria, BC, V8W 9J8 or by phone toll free at 1-866-209-2111.

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UVin/UBrew (Ferment-on-Premises) Transfer of Location

Credit Card Information (To be submitted by fax or mail only)

Name of cardholder (as it appears on card):

Credit card number:

Expiry date: /
(Month) (Year)

Signature: _____