

**CHANGE IN LICENSEE INFORMATION/LICENSED PREMISES**

This form is to be used for any changes that need to be made to the licensed premises or the licensee's information. It is used for most of the miscellaneous license reporting requirements, including, but not limited to: Reporting changes in corporations, limited liability companies, or limited partnerships that do not require a license transfer application; Request for Condition Modification/Removal; Request for approval of physical changes to the licensed premises.

**Instructions:** Complete items as appropriate. Items # 1, 2, 3, 4, 6 should be the licensee's current information before the change. When this form is completed, it must be submitted to the District office. Fees are non-refundable pursuant to Section 23320 B&P. Fee schedules are located at <https://www.abc.ca.gov/licensing/license-fees/>.

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**1. License Number**

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**2. Licensee's Name** (If an individual: first name, middle name, last name. If a corporation, limited partnership, or limited liability company: name of entity)

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**3. Doing Business As** (DBA)

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**4. Premises Address** (Street number and name, city, zip code)

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**5. District Office**

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**6. Business Mailing Address** (Street number and name, city, zip code)

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**7. Licensee's Phone Number**

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**8. Licensee's Email Address**

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**9. Action or Change**

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|---|---|
| a. Corporate Change – Section 23405                   | e. Premises Expansion – Section 24072         |
| b. Limited Partnership Change – Section 23405.1       | f. Change in Premises Designation - Rule 64.2 |
| c. Limited Liability Company Change – Section 23405.2 | Premises Reduction                            |
| d. Conditional Modification/Removal – Section 23803   | Physical Character Change                     |
| (Utilize ABC-333-C for approvals)                     | g. Other: _____                               |

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**10. Details of Change**

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**11. Signature** (only one signature required)

Certification for Signature of a Licensed Principal

I declare under penalty of perjury that I am authorized to sign for the licensed entity identified in Item 1 above. I have read the foregoing and know the contents thereof.

Signature

Printed Name and Title

Date

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**FOR ABC USE ONLY**

Receipt Number

Fee Paid

ABIS Updated

Yes      No

Updated By (Initials)

\_\_\_\_\_

Document Explaining Change Attached

Yes      No

LR Comments:

Recommendation

Licensing Representative Signature

Date Signed

Recommendation

Supervisor's Signature

Date Signed

*Distribution: Original to HQ Licensing; Copy to District file.*