ADVICE OF CORRECTION

This form is to be used for certain changes that need to be made to the licensee's information. It is used for most of the miscellaneous license reporting requirements where an application is not required, including:

- Reporting corrections to license information such as a change in DBA (doing business as) or entity name change
- Reporting a change of mailing address

Instructions: Complete items as appropriate. Items # 1, 4, 5, 7, 9 should be the licensee's current information before the change. When this form is completed, it must be submitted to the District office.				LICENSE NUMBER RECEIPT NUMBER RECEIPT NUMBER						
						4. LICENSEE'S NAME	5. DOING BUSINESS AS (DBA)		6. DATE	
						7. PREMISES ADDRESS (Street number and name, city, zig	o code)			8. DISTRICT OFFICE
9. MAILING ADDRESS (Street number and name, city, state, zip code)				10. LICENSEE'S PHONE NUMBER						
11. TYPE OF PENDING APPLICATION	12. DATE APPLICATION FILED	13. ABIS UPDATED Yes No	UPDATED BY (INITIALS)	14. DOCUMENT EXPLA CHANGE ATTACHED Yes	AINING No					
15. ACTION OR CHANGE		165 110		103						
 Mailing Address Change Replacement of License Certificate Other 	e (This is a non-refundable fee									
16. DETAILS OF CHANGE (e.g., annexation into city, fee for	Code 8, etc.)									
_										
	Ligging			In the course						
17. RECOMMENDATION (Required for Items 15a-c only)	LICENSING REPRESENTATIVE SIGNA	IURE		DATE SIGNED						
18. RECOMMENDATION (Required for Items 15a-c only)	SUPERVISOR'S SIGNATURE			DATE SIGNED						

Distribution: Original to HQ Licensing (If replacement of license certificate, original to HQ Cashier with Transmittal);

Copy to District file

ABC-219 (rev. 07/19)