

Consumer Affairs and Licensing Mayor Martin J. Walsh

CHANGE OF MANAGER APPLICATION LICENSED PREMISE INFORMATION

Corporate Name:	
Doing Business As (D/B/A):	
Business Address:	
Telephone No.:	License No.: CAL-
PROPOSED MANA	GER OF RECORD INFORMATION
Name*:	Telephone No.:
Date of Birth:P	lace of Birth:
Mother's Maiden Name:	Father's Name:
Home Address:	
Email:	
Reason for change of manager:	
1. Is the proposed manager an officer, dir	ector or stockholder in this corporation? Ves No
a. If yes, what is the title of the prop	oosed manager?
	osed manager's name?
2. Within the past 7 years, has the propose	ed manager been convicted of a felony or violation of a state
or federal narcotics law? \Box Yes \Box No	
answers contained in this application are are no other indirect interests in this licen	er the pains and penalties of perjury, I affirm that the true to the best of my knowledge and belief, and that there se other than those indicated in this application. Date:
	Date:
Applicant email:	

*** Change of Manager may be subject to a hearing. Please provide a copy of the Common Victualler or Alcohol Beverage license with the proposed manager listed. ***

BOSTON CITY HALL, ROOM 817, ONE CITY HALL SQUARE, BOSTON, MA 02201 TELEPHONE: LICENSING DIVISION 617-635-4165 • FAX: 617-635-0709 • MOCAL@BOSTON.GOV