



City of Boston
Licensing & Consumer Affairs

Commissioners:
Kathleen M. Joyce, Chairman
Keeana S. Saxon
Liam P. Curran
Executive Secretary:
Lesley Delaney Hawkins

Request for Changes to License / Corporation (Revised 8/2020)

Please complete this form when requesting any type of change to an existing Billiard, Bowling Alley, Common Victualler, Fortune Teller, Innholder (w/ no alcohol), or Lodging House License. Please complete this form only when requesting changes to the operating hours, conditions, or capacity of a Club, Common Victualler with Alcohol, Druggist, General on Premise, Innholder with Alcohol, Retail Package Store, or Tavern License.

Applicant (Individual/Corporation): _____

Doing Business As (d/b/a, if different from above): _____

Business Address: _____

City: _____ State: _____ Zip Code: _____

License Number: LB - _____ Contact Phone Number: _____

Email Address: _____

Type of Change(s) Requested: (i.e. manager, hours, capacity, add officer/ shareholder, etc.): _____

Change from: _____

Change to: _____

I hereby certify under the pains and penalties of perjury that the above is true and accurate information.

Signature: _____

Print Name: _____

Title as it relates to business: _____

Dated: _____

For the Board's official use only

Granted: _____ Denied: _____

Remarks/Conditions: _____



Personal Information Form (Revised 8/2020)

Section 1- Licensee Information

Name of licensee/business: _____

Doing Business As (d/b/a, if different from above): _____

Business Address: _____

City: _____ State: _____ Zip Code: _____

Business Phone No.: _____ Business Fax No.: _____

Business Email Address: _____

Section 2 - Personal Information:

Name: _____ Social Security No.: _____

Date of Birth: _____

Home Address: _____

City: _____ State: _____ Zip Code: _____

Place of Current employment: _____

Employment History for last 10 years (dates, positions, employer, address): _____

Title as it relates to the business/licensee: _____

Describe your interest in this business/licensee: _____

I hereby certify under the pains and penalties that the above is true and accurate information.

Signature: _____

Print Name: _____

Dated: _____