



AGREEMENT TO TRANSFER LIQUOR LICENCE(S) TO NEW OWNER

All Licence Types

Liquor Control and Licensing Form LCLB001d

INSTRUCTIONS: Complete all applicable fields, attach required documents and submit to the Liquor Control and Licensing Branch. You may complete this form, one of three ways: 1) at your computer, then print; 2) by hand - print clearly using dark ink; or 3) online through the OneStop business registry at <http://onestop.gov.bc.ca> if you are transferring a food primary licence. If you have any questions about completing this application, call the Branch toll-free at 1-866-209-2111.

PART 1: Current Licensee's Business Information

Licensee Name: Business #:

Contact Phone #
with area code:

PART 2: Licence(s) to be Transferred (Please check (☑) all that apply)

Food Primary

1. Licence #: Expiry Date: (Month/Day/Year) Establishment name:

Establishment physical address:
Street City Province Postal Code

2. Licence #: Expiry Date: (Month/Day/Year) Establishment name:

Establishment physical address:
Street City Province Postal Code

Liquor Primary

1. Licence #: Expiry Date: (Month/Day/Year) Establishment name:

Establishment physical address:
Street City Province Postal Code

2. Licence #: Expiry Date: (Month/Day/Year) Establishment name:

Establishment physical address:
Street City Province Postal Code

Licensee Retail Store

1. Licence #: Expiry Date: (Month/Day/Year) Establishment name:

Establishment physical address:
Street City Province Postal Code

Manufacturer (Brewery, Distillery or Winery [on-site retail store and agent included])

Licence #: Expiry Date: (Month/Day/Year) Establishment name:

Establishment physical address:
Street City Province Postal Code

UBrew/UVin

Licence #: Expiry Date: (Month/Day/Year) Establishment name:

Establishment physical address:
Street City Province Postal Code

Catering

Licence #: Expiry Date: (Month/Day/Year) Business name:

Business location address:
Street City Province Postal Code

<input type="checkbox"/>	Agent Note: An Agent's licence that shares a licence number with a manufacturer cannot be transferred without transferring the manufacturer's licence.	Licence #: <input style="width:90%;" type="text"/>	Expiry Date: <input style="width:90%;" type="text"/> <small>(Month/Day/Year)</small>
<input type="checkbox"/>	Wine Store	Licence #: <input style="width:90%;" type="text"/>	Expiry Date: <input style="width:90%;" type="text"/> <small>(Month/Day/Year)</small>
Establishment name: <input style="width:90%;" type="text"/>		Establishment physical address: <input style="width:90%;" type="text"/>	
<small>Street</small>		<small>City</small>	
<small>Province</small>		<small>Postal Code</small>	

(If you are transferring more than two licenses in a licence class, or for additional licenses of any type please use a separate sheet and attach to this agreement)

PART 3: New Applicant Information	PLEASE PROVIDE A COPY OF THIS COMPLETED FORM TO THE NEW APPLICANT FOR THEIR RECORDS.
Applicant Full Name: <input style="width:90%;" type="text"/>	
Applicant Phone # <input style="width:90%;" type="text"/> <small>with area code:</small>	Applicant E-mail: <input style="width:90%;" type="text"/>
Contact Person: <input style="width:90%;" type="text"/>	Contact Person Title/Position: <input style="width:90%;" type="text"/>

PART 4: Agreement to Transfer Licence(s)
 (Signature of signing officer of a company or society, sole proprietor or all individuals in a partnership is required here.)
 I (we) hereby relinquish all rights, title and interest in the above licence when the general manager transfers the licence to the applicant. Until that time I (we) acknowledge that I (we) remain responsible as the licensee.

Full name of current owner: <input style="width:90%;" type="text"/>	Date: <input style="width:90%;" type="text"/> <small>(Day/Month/Year)</small>	Signature: _____
Full name of current owner: <input style="width:90%;" type="text"/>	Date: <input style="width:90%;" type="text"/> <small>(Day/Month/Year)</small>	Signature: _____
<i>Proposed</i> new owner: <input style="width:90%;" type="text"/>	Date: <input style="width:90%;" type="text"/> <small>(Day/Month/Year)</small>	Signature: _____
<i>Proposed</i> new owner: <input style="width:90%;" type="text"/>	Date: <input style="width:90%;" type="text"/> <small>(Day/Month/Year)</small>	Signature: _____

(If there are more than two owners please use a separate sheet and attach to this application.)

- PART 5: What Happens Next?**
1. The licensee provides a copy of the completed copy of this form to the transfer applicant (new owner) for their records.
 2. The licensee submits a complete copy of this form to the Liquor Control and Licensing Branch head office in Victoria.
 3. The new owner submits a complete *Transfer of Liquor Licence* form (LCLB001c).
 4. **If an application has not been received from the new owner to transfer the liquor licence within 30 days from the date the agreement to transfer is received by the branch, a notice to cancel the liquor licence(s) will be issued.**

Liquor Control and Licensing Branch
 Location: 4th Floor, 3350 Douglas St., Victoria BC V8Z 3L1
 For Mail Only: PO Box 9292 Stn Prov Govt Victoria, BC V8W 9J8
 Toll-Free Phone: 866 209-2111 Fax: 250 952-7066 Web: www.pssg.gov.bc.ca/lclb E-mail: liquor.licensing@gov.bc.ca

Freedom of Information and Privacy Act - The information requested on this form is collected for the purpose of obtaining or making changes to a liquor licence application. All personal information is collected under the authority of Section 15 of the Liquor Control and Licensing Act (RSBC 1996, c.267). Questions should be directed to: Liquor Control and Licensing Branch, Freedom of Information Officer, PO Box 9292 STN PROV GOVT, Victoria, BC V8W 9J8. Ph: In Victoria, 250 952-5787 Outside Victoria, 1 866 209-2111. Fax: 250 952-7066