



Licensing and Regulation Division
 PO Box 43098
 Olympia WA 98504-3098
 FAX 360/753-2710
 www.liq.wa.gov

License No _____

Trade Name _____

UBI No _____

OUTLINE OF COSTS explaining all funds used for your CURRENT application

REAL PROPERTY (land and building): Lease rental (one month + deposit, if any) **OR**
 Total purchase cost \$ _____

Business purchase cost (Purchase & Sale Agreement normally includes trade name, good will, equipment, inventory, corporate stock or LLC units) \$ _____

Cost of opening a new business (equipment, furniture, inventory) **or COST TO CHANGE YOUR CURRENTLY LICENSED PREMISES.** \$ _____

Remodeling/leasehold improvements/construction \$ _____

Miscellaneous fees (such as license/gambling, legal, architectural, health/city/county permits, opening and closing costs, working capital, etc) \$ _____

TOTAL \$ _____

SOURCE OF FUNDS and CERTIFICATION for all liquor license application funds

1. SAVINGS/CHECKING/INVESTMENT ACCOUNTS:

Bank/Institution Name: _____ Account #: _____ \$ _____

Bank/Institution Name: _____ Account #: _____ \$ _____

Bank/Institution Name: _____ Account #: _____ \$ _____ Total \$ _____

2. LOANS FROM BANKS/MORTGAGE COMPANIES/CREDIT CARDS, ETC:

Bank/Company Name: _____ Account #: _____ \$ _____

Bank/Company Name: _____ Account #: _____ \$ _____

Bank/Company Name: _____ Account #: _____ \$ _____ Total \$ _____

3. CASH BORROWED, GIFTED, OR LOANED FROM A PERSONAL SOURCE:

Name: _____ Relationship: _____ \$ _____

Name: _____ Relationship: _____ \$ _____ Total \$ _____

4. SALE OF PROPERTY: (Explain the type of property and the sale date. Include the property address for the sale of land.)

_____ Total \$ _____

5. EXPLAIN THE SOURCE OF MONEY KEPT AT HOME:

_____ Total \$ _____

6. DEFERRED CONTRACTS (PROMISSORY NOTES):

Contract with: _____ Dollar amount \$ _____

Contract with: _____ Dollar amount \$ _____ Total \$ _____

7. OTHER (To include landlord improvements; non-monetary contributions such as labor & equipment)

_____ Total \$ _____

Total of the Source of Funds must meet or Exceed the Outline of Costs total TOTAL \$ _____

CERTIFICATION	I certify under penalty of perjury that all answers and statements are true, correct and complete. I understand that untruthful or misleading answers are cause for rejection of my application and/or revocation of any license granted. I hereby authorize investigation of my criminal history, financial records and other sources as necessary for licensing.
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PRINT NAME _____

SIGNATURE _____ DATE _____

(Sole proprietor, partner, corporate officer or limited liability company manager or member)
 LIQ 825 -8/09