NORTH CAROLINA ALCOHOLIC CONTROL COMMISSION
OWNERSHIP VERIFICATION FORM

Corporation/LLC Name: _____
Trade Name: _____
Location Address: _____
Permit Number or File Number (if applicable): _____

Complete the applicable section below based on your applying entity type.

CORPORATION

List below the current top four corporate officers (Pres., VP, Sec., Tres.) and any person or entity that owns stock in the corporation. Note: Only one officer or stockholder needs to print, sign, and notarize his/her signature below.

Name	Officer Title	% of Stock Owned

LIMITED LIABILITY COMPANY

List below each member and their membership interest in the LLC. These may be individuals and/or other entities. Note: Only one interest holding member needs to print, sign, and notarize his/her signature below.

Name	% of Membership Interest

Printed Name: _____**Signature of Applicant:** _____

State of _____, County of _____ I certify that _____ personally appeared before me this day and acknowledged the due execution of the foregoing document. Witness my hand and seal, this_____ day of _____, 20 ___.

_____ **My Commission Expires:** _____

Notary or other person qualified by law to administer oaths

(NOTE: MUST BE STAMPED OR SEALED BY NOTARY)