



WARRINGTON TOWNSHIP

852 Easton Road ♦ Warrington, Pa 18976
Phone: 215-343-9350 ♦ Fax: 215-343-5944

APPLICATION FOR TRANSFER OF LIQUOR LICENSE

Date of Application: _____

Fee: \$1,000; Escrow: \$1,000

The undersigned applicant hereby request approval of the inter-county transfer of a liquor license from [municipality] _____ to [Business Name] _____

1. Property Owner Name: _____ Phone: _____

Address: _____

2. Applicant Name/License Holder: _____ Phone: _____

Address: _____

3. Attorney Name/Agent: _____ Phone: _____

Address: _____

4. If applicant is not the owner, state the applicant's or agent's authority to submit the application:

5. License Information:

a. License Number: _____

b. Type of license: _____

c. Current license owner: _____

d. License owner's address: _____

e. Phone: _____

f. Name/ address of establishment from which license will be transferred _____

g. List LCB citation on this license

6. Name of business/ address where license is to be transferred:

7. Tax Parcel Number: 50-_____

8. Present Zoning Classification: _____

9. Present Use of property: _____

10. Application requirements (10 copies of each document):

- a. Location map, labeling the parcel to which the license is proposed to be transferred.
- b. Deed, agreement of sale, and/ or lease of the labeled parcel
- c. List of adjoining property owners (abutting and across the street)

11. Fee: \$1,000 : Escrow: \$1,000

12. In addition to the above stated fee and escrow, by signing this application, the applicant agrees to pay all expenses incurred by Warrington Township with regard to this application, including cost for expert testimony. These costs are due and payable to Warrington Township with in thirty (30) days after submission of an invoice or statement.

I hereby swear that the information provided in this application is true and correct. I hereby authorize Warrington Township to contact the Pennsylvania Liquor Control Board, and other agencies to review the information related to this application

Applicant: _____

Date: _____

Approved by: _____

Date Issued: _____