

CSR:
Amount:



# AGENT CHANGE

Arizona Dept. of Liquor Licenses and Control  
800 W. Washington St. 5<sup>th</sup> Floor Phoenix, AZ 85007  
(602) 542-5141

<b>DLLC USE ONLY</b>	
Job #:	
Date Accepted:	
CSR:	

**Type or Print with Black Ink**

The Agent Change application fee is \$100. Except where a licensee holds multiple licenses and requests simultaneous changes, then the fee is \$100. for the first application and \$50.00 each for the remaining licenses not to exceed \$1000.00

License #  Single \_\_\_\_\_

Multiple, attach separate sheet listing all license numbers and Business Names (DBA's)

Current Agent Name: \_\_\_\_\_  
Last
First
Middle

New Agent Name: \_\_\_\_\_  
Last
First
Middle

New Agent Cell Number: \_\_\_\_\_ Alternate Phone Number: \_\_\_\_\_

Premises Name (Doing Business As-DBA) \_\_\_\_\_

Correspondence Mailing Address: \_\_\_\_\_  
**All mail will be sent to this address**
Street
City
State
Zip Code
County

Agent Email Address: \_\_\_\_\_  
**All email will be sent to this address**

**Declaration:**

I, (Print Name) \_\_\_\_\_, hereby consent to the appointment of Agent for this license. I declare under penalty of perjury that I am authorized by the licensee to submit this application. I have read the contents of this application, and to the best of my knowledge believe all statements made on this application to be true, correct and complete.

\_\_\_\_\_

**Signature**

**“Agent” definition: a person who is designated by an applicant or licensee to receive communications from the department and to file and sign documents submitted to the department on behalf of the applicant or licensee.**