

**ABLE COMMISSION QUESTIONNAIRE
TAX CERTIFICATION LETTER FOR LIQUOR LICENSE**

Name: _____

Name applying for License in: _____

Address of Business: _____

Applying as: (Circle One)

SOLE PROPRIETOR LLC CORPORATION/ NON-PROFIT PARTNERSHIP

Do you own any REAL or PERSONAL property in Canadian County? (Circle One) YES NO

If so, please list address(es): _____

PERSONAL PROPERTY ACCOUNT (#'S): _____

REAL ESTATE ACCOUNT (#'S): _____

FOR OFFICE USE ONLY:

If **Sole Proprietor**, check Individual Name and Business Name (put both on the letter)

If **LLC**, check Business Name in LLC only

If **Corporation/Non-Profit**, check Business Name in Corporation only

If **Partnership**, check each Partner's Name and Business Name (put all names on the letter)

IF YOU SEARCH INDIVIDUAL NAME, PLEASE KEEP COPY OF DRIVER'S LICENSE