



Montgomery County Alcohol Beverage Services
Board of License Commissioners

Transfer Affidavit

I/We hereby state that the contract and settlement information contained in this affidavit is true and correct.

Facility Name

Settlement Date

Buyers:

Sellers:

Signature Applicant A

Signature of Licensee A

Printed Name of Applicant A

Printed Name of Licensee A

Date

Date

Signature Applicant B (if more than one)

Signature of Licensee B (if more than one)

Printed Name of Applicant B

Printed Name of Licensee B

Date

Date

Signature Applicant C (if more than two)

Signature of Licensee C (if more than two)

Printed Name of Applicant C

Printed Name of Licensee C

Date

Date