AFFIDAVIT OF WITHDRAWAL OF LIQUOR LICENSE APPLICATION

**IN THE MATTER OF:**

APPLICANT NAME:

TRADE NAME/DBA:

ADDRESS:

CITY: STATE: ZIP CODE:

TELEPHONE: EMAIL:

LICENSE NO. (IF ALREADY PROVIDED BY THE STATE): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

I, , an authorized representative of the above-named Applicant hereby voluntarily WITHDRAW the application for

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ dba \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ from consideration and all related licensing privileges.

Applicant states that this WITHDRAW is made voluntarily, and any refunds for the amount(s) already paid to the City is forfeited upon acceptance of this Affidavit by the City.

I affirm under penalty of perjury, I am authorized to surrender this license on behalf of the aforementioned Applicant.

Signature

Title Date

STATE OF ) ) SS. COUNTY OF ) Subscribed and sworn to before me this day of , 20 . Witness my hand and official seal,

Notary Public

My commission expires