

EXPLANATION FOR SOLE PROPRIETOR CHECKLIST:

1. **OWNERSHIP OF PREMISE:** MUST BE IN APPLICANT NAME ONLY
A copy of the warranty deed or a lease agreement showing that you have the right to be occupying the premise and are in control of the premises.
2. **Bill of Sale or Lease for the Furniture, fixtures and equipment:** MUST BE IN APPLICANT NAME ONLY
Unless already stated in the above document, you will need a document stating you either own or are leasing/renting the furniture fixtures and equipment.
3. **CIGAR BAR: BILL OF SALE FOR HUMIDOR:** MUST BE IN APPLICANT NAME ONLY
Need a bill of sale for the Humidor.
4. **IF AN ON-PREMISE LICENSEE AND HAVE A DRAFT SYSTEM:** MUST BE IN APPLICANT NAME ONLY
Need a copy of the bill of sale with a \$\$ amount or lease for the draft system.
5. **IF YOU ARE BUYING AN ALREADY LICENSED ESTABLISHMENT AND THERE IS ALCOHOL:**
MUST BE IN APPLICANT NAME ONLY
Need a bill of sale with a \$\$ amount along with a complete inventory of the stock by brand and type.
6. **IF AN ON-PREMISE LICENSE:** MUST BE IN APPLICANT NAME ONLY
Must have a permit of assembly showing the seating capacity allowed by the local fire department.
7. **IF AN ON-PREMISE LICENSE:** MUST BE IN APPLICANT NAME ONLY
Must have a food certification permit (health certificate) from the local or state health agency or a score sheet with a rating of 70 or above.
8. **CERTIFICATE OF REGISTERED TRADE NAME FROM THE NH SECRETARY OF STATES OFFICE:** MUST BE IN APPLICANT NAME ONLY.
9. **NOTARIZED AFFIDAVIT FOR THE SOLE PROPRIETOR – attached.**
10. **IF APPOINTING A MANAGER FOR THE ESTABLISHMENT MUST HAVE A LETTER FROM SOLE PROPRIETOR**
appointing person as manager and attach an affidavit for the manager and or persons in charge.
11. **COPY OF THE CERTIFICATE OF MTS TRAINING**
(if attended prior to getting license) Must be either designated manager in writing or owner.
12. **DESIGNEE NOTIFICATION FOR MTS TRAINING FILLED OUT AND SIGNED BY APPLICANT- attached**
13. **IF ON-PREMISE RESTAURANT LICENSE WE MUST HAVE A COPY OF YOUR MENU.**
14. **TOWN APPROVAL**
Need letter from town stating they have no objections to you having a liquor license at this address (only need if within 15 days of submitting your request for application to us). Additional permits (In the city/town of Salem, Manchester or Bedford must have a license issued by city/town for operation on Sunday, in the town of Hudson must have a permit from the town of Hudson).
15. **IF A COMBINATION LICENSE –** must have proof of \$3,000.00 wholesale grocery stock available to public Must include milk (including dairy), bread, meat, (vegetables, fruits- canned or fresh), cereal and snack food (soda, juice, water, candy, ice cream, pastries, chips, etc.)
16. **IF ON-PREMISE LICENSE WANTING ENTERTAINMENT**
Letter from town stating they have no objections to you having entertainment at your establishment.
17. **IF THERE WAS A PREVIOUS LICENSE PRIOR TO YOU**
Need previous license, copy of previous license, or trade name and license number of previous license.
18. **IF SOMEONE OTHER THAN APPLICANT WILL BE SIGNING THE APPLICATION**
Must have a notarized original power of attorney and affidavit for person with power of attorney.



**State of New Hampshire
Liquor Commission
Division of Enforcement & Licensing**



SOLE PROPRIETOR CHECKLIST FOR DOCUMENTS NEEDED

Liquor License Applicant Checklist of Documents Required for Licensing

RSA 178:3 requires specific details for the qualification of the issuance of a NH Liquor License. As a Liquor License Applicant, **you must provide copies of the following documents** for consideration of licensure. The liquor license is issued by the NHSLC and all documents are retained at the NHSLC Enforcement & Licensing Office in Concord, NH.

ALL DOCUMENTS MUST APPEAR IN THE SOLE PROPRIETOR'S – (APPLICANT) NAME

EIN# _____		
1.	<input type="checkbox"/> Ownership of Premise: WARRANTY DEED, LEASE AGREEMENT – TO THE SOLE PROPRIETOR	On or Off Premise
2.	<input type="checkbox"/> Bill of Sale/Lease: FURNITURE, FIXTURES, and EQUIPMENT TO THE SOLE PROPRIETOR	On or Off Premise
3.	<input type="checkbox"/> Cigar Bar: Bill of Sale for Humidor TO THE SOLE PROPRIETOR	On Premise
4.	<input type="checkbox"/> Bill of Sale/Lease: DRAFT SYSTEM TO THE SOLE PROPRIETOR	On Premise
5.	<input type="checkbox"/> Bill of Sale: ALCOHOLIC BEV W/A COMPLETE INVENTORY OF STOCK TO SOLE PROPRIETOR	On or Off Premise
6.	<input type="checkbox"/> Permit of Assembly: CONTACT THE LOCAL FIRE DEPARTMENT – TO SOLE PROPRIETOR	On Premise
7.	<input type="checkbox"/> Food Service Permit: CONTACT LOCAL OR STATE HEALTH AGENCY TO SOLE PROPRIETOR	On Premise
8.	<input type="checkbox"/> Certificate of Reg. Trade Name: NH SECY OF STATE (603)271-3242 TO THE SOLE PROPRIETOR	On or Off Premise
9.	<input type="checkbox"/> Notarized Affidavit: For SOLE PROP (section 5 must be initialed by affiant & must be notarized)	On or Off Premise
10.	<input type="checkbox"/> Letter of Managerial Appointments w/supporting affidavits or affidavits for Person in Charge	On or Off Premise
11.	<input type="checkbox"/> Certificate of MTS Training (Management Training Seminar)	On or Off Premise
12.	<input type="checkbox"/> Designee Notification for MTS Training	On or Off Premise
13.	<input type="checkbox"/> Menu (restaurant licenses only)	On Premise
14.	a. <input type="checkbox"/> TOWN APPROVAL <input type="checkbox"/> letter of approval <input type="checkbox"/> 15 days no letter <input type="checkbox"/> Objection b. <input type="checkbox"/> Business license (Salem, Manchester, & Bedford) or Special Permit (Hudson Police Dept)	On or Off Premise On or Off Premise
15.	<input type="checkbox"/> Proof of \$3,000 Wholesale Grocery Stock available to public (comb licenses only) 7 Items: Meat, Veg, Fruit, Dairy (milk), Bread, Cereal, Snack Foods	Off Premise
16.	<input type="checkbox"/> Entertainment approval from the Town	On Premise
17.	<input type="checkbox"/> Previous License	On or Off Premise
18.	<input type="checkbox"/> Notarized Original Power of Attorney & Original Affidavit for any person or lawyer	On or Off Premise

OTHER INFORMATION YOU NEED TO KNOW

The following information is NOT required to obtain a NH Liquor License, however the NHSLC feels we should advise you of the following. The decision to acquire or dismiss the advice is purely your option.

- **Federal Tax Stamp** This stamp is required by the Federal Bureau of Alcohol, Tobacco and Firearms. Call 1-800-398-2282 for further information.
- **Rooms & Meals Operator License** Contact the NH Department of Regulated Revenue at (603) 271-3701.
- **Purchase of Liquor on Credit** If you desire to purchase liquor for the State of New Hampshire on credit, you must contact the Accounts Receivable Department at (603) 271-2353.
- **Town or City Approval** Some New Hampshire cities and towns require additional approval to meet city or town ordinances or local zoning laws. Check with your local city or town for regulations on "Sunday Permits", signage, entertainment, etc.
- **Free Educational Programs offered to the public by the Enforcement & Licensing Division** of the NHSLC.
 - T.E.A.M. designed for On-Sale Licensees and their employees.
 - M.T.S. designed for all licensees and/or managers
 - Cops in Shops
 - Ready or Not ©

Check our website @ www.state.nh.us/liquor for dates, times and locations or call the Community Outreach Unit at 603 271-8531.

Licensing Specialist/Investigator Signature: _____ Date: _____

Call 271-3521 when establishment is ready for investigator inspection.

*After inspection call for licensing appointment, a **COPY** of **ALL** checked documentation shall be provided for the final appointment.*



**State of New Hampshire
Liquor Commission
Division of Enforcement & Licensing**



AFFIDAVIT

This affidavit is filed with the Liquor Commission's Division of Enforcement & Licensing in support of *my ownership, management control, employment by a business licensed, or applying for a license to sell alcoholic beverages and tobacco under Chapter 178 of the Revised Statutes Annotated.*

I, _____ being duly sworn do depose and say:
(Print Name)

1. **Business Trade Name:** _____ **Liquor Lic#** _____

Address _____
(No. - Street) (City / Town) (State) (Zip)

Mailing Address _____
(No. - Street) (City / Town) (State) (Zip)

2. I live at: _____
(No. - Street) (City / Town) (State) (Zip)

3. I was born in _____ on _____
(POB: i.e. State, or Province if Canada, Country if foreign) (Date of Birth) (Age)

Home phone _____ Male Female Race _____ Soc. Sec # _____

4. I am I am not a citizen of the United States
If not a citizen, R.A. Document # or other Identification submitted _____

5. **I understand RSA 178:4 & RSA 179:23, IV, prohibit convicted felons from holding a license to sell alcohol or assuming control of licensed premise. By signing this affidavit I swear this information is true and accurate and that this document is signed under the penalty if false swearing (RSA 641:2)**

6. Have you ever been charged with a crime? Yes No

If yes, were you convicted of a felony? Yes No

7. I am filing this document in support of my employment as a
 Corporate Officer POA Person in Charge
 Partner LLC Member Proprietor
 LLC Manager Manager Title/Position _____

RSA 179:23, IV requires the licensee to designate one or more people to be in charge of the premise in the licensee' absence.

8. I swear before the **Justice of Peace or Notary Public** that this information is **true** and **accurate**, and that this document is signed under the penalty if false swearing (RSA 641:2)

Signature _____ Date _____

County _____ SS. Date: _____

Personally appeared before me _____ known to be the person who executed
and made oath that the same is true. (Affiant Name)

SEAL _____ Justice of Peace / Notary Public



State of New Hampshire
Liquor Commission
Division of Enforcement & Licensing



LICENSEE TRAINING DESIGNATION FORM

I, _____, am a
(Print full name)

- Proprietor Partner Corporate Officer Corporate Director
- Limited liability company member Limited liability company manager
- I have the Power of Attorney (copy must be attached)

of/for the business applying for a license to sell beverage alcohol under the provisions of RSA 178:2 of New Hampshire's Revised Statutes Annotated. Pursuant to the laws of the State of New Hampshire I am duly authorized to appoint and designate the following individual to attend training in fulfillment of the requirements of [RSA 178:2](#).

I understand and acknowledge that New Hampshire Law provides for the possible suspension of my license to sell beverage alcohol 45 days after the issuance of the license if I, or my duly authorized manager*, do not attend the Liquor Commission's Management Training Seminar (MTS.)

I further understand that I must complete a new designation form should the person identified below not attend training on behalf of the licensee. Failure to submit a new and updated designation form in a timely manner may result in the license being suspended due to my failure to advise the Division of a change in my designee.

Name of Designated Manager _____
(Print Full Name)

Licensee Trade Name _____
(Print Trade Name)

NH Liquor License Number _____

_____ Date
Duly Authorized Person to Sign

_____ Date
Licensing Specialist/Enforcement Officer

**Pursuant to Liquor Rule 701.01,(l) a manager is "an individual who exercises control over the policies, operating procedures and operations of the business" and designated by the license holder to attend the MTS for the licensee.*



State of New Hampshire
Liquor Commission
Division of Enforcement & Licensing



TRAINING REQUIREMENTS

The 2001 Legislature passed SB 76 authorizing NHSLC to establish the Management Training Seminar program. New liquor licensees must attend training session as part of their licensing requirement. **Effective September 9, 2001 all persons who hold a retail license under the provisions of RSA 178:2 shall attend a training program within 45 calendar days of the issuance of the license.**

The training program must be attended by:

- The proprietor of a sole proprietorship or a manager designated by the proprietor to attend in lieu of the proprietor.
- All partners in a partnership or a manager designated by the partners to attend in lieu of the partners.
- An officer of a corporation or a management representative designated by the corporation to attend in lieu of an officer.
- A member of a limited liability company or a manager designated by the limited liability company to attend in lieu of a member.
- ONE-DAY Licensees are also required to attend MTS training. However those applicants must attend a program prior to the effective date of the event and the MTS Certificate will be good until 12 months from the date of event for the same individual representing and appointed by the non-profit.

Should the licensee fail to comply with the order, the liquor license may be suspended upon the 46th day. The licensee has the opportunity to attend a training session up to 45 days prior to licensing as well as up to 45 days after licensing. The Special Services Unit will teach the training sessions on a weekly basis regionally throughout the state.

**To see current schedules and to register for MTS class go to [MTS Class Schedule](#)
OR call 271-8531.**

In addition to the FREE mandatory training, the NHSLC-Division of Enforcement & Licensing provides FREE training for all licensees and their employees. Participants learn how to check IDs, the latest information regarding false identification, server intervention, and criminal and civil liability all associated with the NH State Liquor Laws.

For further information about the Management Training Seminar, contact the Special Services Unit of the NHSLC Division of Enforcement & Licensing at

(603) 271-8531, or check our website at [MTS Training](#) for dates.