Michigan Department of Licensing and Regulatory Affairs
Liquor Control Commission (MLCC)
7150 Harris Drive, P.O. Box 30005 - Lansing, Michigan 48909-7505
Toll Free (866) 813-0011 • www.michigan.gov/lcc

Business ID: _____

Request ID: _____
(For MLCC use only)

# Participation Permit Application

**(For terms greater than 10% of the gross sales)**
(Authorized by R 436.1041, R 436.1105 and R 436.1117)

- Owner (s) of the licensed business must complete the first page of this application.
- Individual members of the non-licensed participant must complete the second page of this application.
- Please attach a copy of the agreement.
- Upon receipt of the completed application and receipt of an executed agreement, your request will be docketed for Commission review.

## Part A - To be completed by the licensee:

**Section1: License information**

1. Name of licensee (as it appears on liquor license): _____
2. Address of licensed establishment: _____
3. E-mail: _____
4. What is the commencement date of this agreement and the duration? _____
5. What is the total percentage of compensation being exchanged for services? _____ %

**Section 2: Non-Licensed Participant Information**

1. Name of non-licensed participant: _____
   - *Corporations/Limited Liability Company(s) - Name should be stated exactly how it was filed with the corporation division.*
2. Number of stockholders/members: _____

   *Each stockholder/member or individual of the non-licensed entity must complete page two of this application.

3. Mailing address of non-licensed participant: _____

**By signing this form you acknowledge the following:**

Licensees shall be held responsible for all actions and conduct of the operation of the licensed establishment and the actions of the manager and/or management company in the conduct of the licensed business, and the licensee shall not transfer these responsibilities to any individual or organization. Failure to uphold this responsibility may result in a violation, suspension , or revocation of the license.

MCL 436.2003 provides that a person who makes a false or fraudulent statement to the Commission, orally or in writing, for the purpose of inducing the Commission to act or refrain from taking action or for the purpose of enabling or assisting a person to evade the provisions of this act is guilty of a violation of this act and is punishable in the manner provided for in section 909.

I certify that the information contained in this form is true and accurate to the best of my knowledge and belief. I agree to comply with all requirements of the Michigan Liquor Control Code and Administrative Rules.

| _____ | _____ | _____ |
|---|---|---|
| Date | Print name of licensee and title | Signature |



LARA is an equal opportunity employer/program. Auxiliary aids, services and other reasonable accommodations are available upon request to individuals with disabilities.

## Part B -To be completed by the Participant

**(For companies with multiple stockholder/members/partners, please make copies of this section for each individual to complete)**

### Section 1 - Individual non-licensed participant information

Date of Birth: _____ Driver's License Number: _____

Name: _____

Home Address: _____

Business Phone: _____ Cell Phone: _____ E-mail: _____

Have you ever legally changed your name? ◯ Yes ◯ No If you are/were married, or changed your name during naturalization or court process, remember to list your prior names.

If you answered yes, please state your prior name(s) (including maiden): _____

Have you ever been arrested? ◯ No ◯ If yes, list below (attach additional sheet if necessary)

| Date | City/State | Charge | Disposition |
|---|---|---|---|
| | | | |
| | | | |

Do you hold any position, either by appointment or election, which involves the duty to enforce any penal law of the United States of America, or the penal laws of the State of Michigan, or any penal ordinance or resolution of any municipal subdivisions of the State of Michigan (civil defense volunteer policeman, mayors, village presidents, and members of city councils are not considered to be law enforcement officers).

◯ Yes ◯ No

Do you hold any class of license for the manufacture or sale of alcoholic beverages at wholesale in Michigan, or any interest (stockholder member) in any class of license for the manufacture or distribution of alcoholic liquor in Michigan which would be in conflict with the granting of this license?

◯ Yes ◯ No

**By signing this form you acknowledge the following:**

By signing, you authorize the MLCC to run a Law Enforcement Information Network (L.E.I.N.) and Secretary of State (S.O.S) check prior to docketing your request for Commission review.

MCL 436.2003 provides that a person who makes a false or fraudulent statement to the Commission, orally or in writing, for the purpose of inducing the Commission to act or refrain from taking action or for the purpose of enabling or assisting a person to evade the provisions of this act is guilty of a violation of this act and is punishable in the manner provided for in section 909.

I certify that the information contained in this form is true and accurate to the best of my knowledge and belief. I agree to comply with all requirements of the Michigan Liquor Control Code and Administrative Rules.

| _____ | _____ | _____ |
|---|---|---|
| Date | Print name of particpant | Signature |



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