

Alcohol and Marijuana Control Office 550 W 7th Avenue, Suite 1600 Anchorage, AK 99501

marijuana.licensing@alaska.gov

https://www.commerce.alaska.gov/web/amco Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board

Form AB-13: Business Name Change

Why is this form needed?

This business name change form is required for any licensee seeking to change the business name of the licensee's licensed premises when the name change is not part of a transfer of ownership or location, per 3 AAC 305.630(c). The required \$250 business name change fee may be made by check, cashier's check, money order, or credit card (VISA, MasterCard, American Express or Discover).

This form must be completed and submitted to AMCO's Anchorage office <u>prior to changing</u> any business name. A new State of Alaska business license must be obtained prior to completing this form. Forms and contact information may be found on the Corporations, Business & Professional Licensing website at https://www.commerce.alaska.gov/web/cbpl/BusinessLicensing.aspx.

Please note that licensees seeking approval of a business name change for more than one liquor license must submit a separate completed copy of this form and pay a separate fee for each license.

or this form and pay a separ	ate lee for <u>each license</u> .				
	Section 1 – Esta	blishment Informa	tion		
Enter information for the	business seeking to be licensed, as ide	entified on the license applica	ation.		
Licensee:		Licens	e Number:		
License Type:					
Current DBA:					
Premises Address:					
City:		State:		ZIP:	
Contact Person:		Conta	act Phone:		
Contact Email:					
Business License #:					
Doing Business As:					
20119 240111000 7.10.					
hereby certify that I am	the person herein named and subscril	bing to this application and t	hat I have rea	d the compl	Initials ete
application, and I know th other documents submitt response in this applicatio or revoking a license/perr	ne full content thereof. I declare that a ed are true and correct. I understand on, or any attachment, or documents mit. I further understand that it is a Cl	all of the information contain that any falsification or mism to support this application, is	ed herein, an epresentation sufficient gro	nd evidence on of any item ounds for de	or n or enying
an application and commi	t the crime of unsworn falsification.				
Printed name of licensee		e of licensee			
	OFFI	ICE USE ONLY			
Issue Date:		Transaction #:			