Change of DBA (Doing Business As) or Trade Name CHECKLIST

<table>
<thead>
<tr>
<th>SUBMIT YOUR APPLICATION PACKET IN THE FOLLOWING ORDER:</th>
<th>Form Number</th>
<th>HLC Initial</th>
</tr>
</thead>
</table>
| ❑ Amount Due: $45.00  
We accept Cash, Cashier’s Check, Money Order, Licensee/Attorney Business Check payable to: City & County of Honolulu,  
or MasterCard/VISA/Discover (plus an applicable service fee).                                                          |             |             |
| ❑ Notification of Authorized Agent (if applicable)                                                                      | LIQ-LIC-106 |             |
| ❑ Request to Change Licensee Trade Name (DBA), Address or Other Contact Information                                         | LIQ-LIC-134 |             |
| ❑ Certificate of Trade Name (T-1) or Assignment of Trade Name (T-4)  
Perform an internet search for T-1 or T-4 form (If dba/trade name is not a Corporate or LLC Name)                       | Form T-1    |             |
| ❑ Return Original Liquor License Certificate issued to your business                                                  | Form T-4    |             |

Note: Any application that is inaccurate or incomplete will be returned.

For questions about forms, please email: liq-licensing@honolulu.gov
NOTIFICATION OF AUTHORIZED AGENT

(Rule 3-81-19.3)

Effective Date: ___________________ Maximum representation is one (1) year.

If less than one (1) year, enter the end date: _______________________

Authorized Agent Name: ______________________________________
Title: ______________________________________

Company Name: __________________________________________________

Mailing Address: __________________________________________________

Bus. #: __________________ Mobile #: __________________ Email: ________________

LCIS Access (Optional)
Choose an LCIS Username (Must be between 8 – 32 characters long, one character per box):

All Licensees/Licenses may be linked to one (1) LCIS Username. One (1) LCIS User Account per email address.

SIGNATURE Authorized Agent ____________________ Date ____________________

PRINT Authorized Agent

License Number(s) for existing licensees: __________________________________________________

Licensee/Applicant: ___________________________________________________________________

Licensee/Applicant Contact Name: ____________________________________________ Title: ________________
Bus. #: __________________ Mobile #: __________________ Email: __________________

Licensee/Applicant certifies that the above named authorized agent may act on their behalf before the Honolulu Liquor Commission. Representation is limited to one (1) year, and must be renewed annually.

____________________________________ Date ____________________
SIGNATURE Licensee (Owner)

PRINT Licensee (Owner)

For HLC Office Use Only

LCIS ENTRY DATE: _______________ HLC STAFF INITIAL: _______________
REQUEST TO CHANGE
LICENSEE TRADE NAME (DBA) / CORPORATE / LLC / PARTNERSHIP
ADDRESS OR OTHER CONTACT INFORMATION
Rule 3-81-17.58

Request to Change (check all that apply):
- Licensee Trade Name (DBA)
- Phone Number(s)
- Email Address
- Licensee Corporate / LLC / Partnership
- Mailing Address
- Other – must specify below

Liquor License No.: ________________
Applicant / Licensee Name: __________________________________________

Licensee EXISTING Information
Existing Corporate / LLC / Partnership Name: __________________________________________________________
Existing Trade Name / DBA: ______________________________________________________________________
Existing Mailing Address: _______________________________________________________________________
Existing Ph #: ____________________________ Existing Mobile Ph #: _____________________________
Existing Email: ____________________________________________________________________________________

Licensee NEW Information
New Trade Name / DBA: __________________________________________________________________________

For New Trade Name (DBA) attach the following three (3) items:
- Certificate of Registration of Trade Name (Dept. of Commerce & Consumer Affairs / DCCA).
- Return original Liquor License Certificate
- $45.00 Filing Fee. Make check payable to the City & County of Honolulu.

For New Corporate / LLC / Partnership Name attach the following two (2) items:
- DCCA Business Information printout.
- Return original Liquor License Certificate. No fee incurred.

New Mailing Address: ____________________________________________________________________________
New Ph #: ____________________________ New Mobile Ph #: ____________________________
New Email: ____________________________________________________________________________________

Other change requests described as follows (documentation may be required):
______________________________________________________________________________________________
______________________________________________________________________________________________
______________________________________________________________________________________________

______________________________       __________________________
SIGNATURE Licensee/Authorized Agent         DATE

______________________________       __________________________
PRINT Licensee/Authorized Agent          TITLE

OFFICE USE:

LCIS ENTRY DATE: ________________ HLC STAFF INITIAL: ________________

LIQ-LIC-134
Rev. 04/16/18