

Alcohol and Gaming Commission of Ontario 90 Sheppard Avenue East, Suite 200 Toronto ON M2N 0A4 Tel.: 416-326-8700 • Fax: 416-326-8711 Toll free in Ontario: 1-800-522-2876 Inquiries: www.agco.ca/iagco Website: www.agco.ca Ferment on Premise Facility Licence 90 Day Contract Out Agreement & Authorization

Agreement and Authorization

Legal name of licence holder as identified on the licence

l/we,

Name of transfer applicant

allow the applicant,

to operate the following Ferment on Premise Facility for a maximum of 90 days from the date the transfer application and fee is received by the Registrar:

Premises/Operating Name as it appears on the licence

Premises Physical Address

City/Town

Province

Postal Code

Phone Number (including area code)

Licence Number

Conditions

By signing this form, both the current licence holder and the transfer applicant acknowledge responsibility for the operation of the facility and that any violation of the *Liquor Licence Act* and its Regulations may result in licence revocation/suspension or refusal of the transfer by the Registrar. Further, the current licence holder shall remain liable under the licence during the period for which the operation of the facility has been contracted out.

The transfer applicant shall cease to carry on business under the current licence, if any of the following occurs:

- The licence expires
- The Registrar refuses the transfer
- The 90 day period expires.

Reminder

The transfer applicant cannot operate the Ferment on Premise Facility until the transfer application, the fee and this Agreement & Authorization is received by the Registrar.

Signatures

Current Licence Holder(s)

Only individual(s) with binding authority may sign. If the licence is held by a Partnership/ Limited Partnership, <u>ALL</u> partners must sign below.

№ 1.	Name	Position/Title	Date (dd/mm/yyyy)	Signature			
	I confirm that I have authority to bind the entity.						
№ 2.	Name	Position/Title	Date (dd/mm/yyyy)	Signature			
	I confirm that I have authority to bind the entity.						
№ 3.	Name	Position/Title	Date (dd/mm/yyyy)	Signature			
	I confirm that I have authority to bind the entity.						

If more space is required, please attach an additional sheet labelled "Current Licence Holder(s)" with each individual's name, position/title, signature, date of signature and whether the individual has authority to bind the entity.

Attachment No attachment

Signatures

Transfer Applicants

Only individual(s) with binding authority may sign. If the licence is held by a Partnership/ Limited Partnership, <u>ALL</u> partners must sign below.

№ 1.	Name	Position/Title	Date (dd/mm/yyyy) 	Signature				
I	I confirm that I have authority to bind the entity.							
№ 2.	Name	Position/Title	Date (dd/mm/yyyy)	Signature				
I	I confirm that I have authority to bind the entity.							
№ 3.	Name	Position/Title	Date (dd/mm/yyyy)	Signature				

I confirm that I have authority to bind the entity.

If more space is required, please attach an additional sheet labelled "Transfer Applicant(s)" with each individual's name, position/title, signature, date of signature and whether the individual has authority to bind the entity.

Attachment No attachment

Notification

The information you submit is collected pursuant to the *Liquor Licence Act*, R.S.O. 1990 Chapter L.19 and/or the *Liquor Control Act*, R.S.O. 1990, Chapter L.18. The principal purpose of the collection is to determine eligibility for the transfer of a licence and/or authorization issued pursuant to the *Liquor Licence Act* and/or the *Liquor Control Act*. The information may also be disclosed pursuant to the *Freedom of Information and Protection of Privacy Act*, R.S.O. 1990, Chapter F. 31. For questions about the collection of this information, please contact Manager, Liquor Eligibility at: Alcohol and Gaming Commission of Ontario, 90 Sheppard Avenue East, Suite 200, Toronto ON M2N 0A4 / Telephone: 416-326-8700 or 1-800-522-2876 (toll free in Ontario) / E-mail: customer.service@agco.ca