AFFIDAVIT OF TRANSFEREE

OF LIQUOR LICENSE

State of	of New Jersey) SS:		
Count	y of Hudson)		
duly s			, an individual, residing at, being of full age and
1.	I am the		
	requesting approval of the munici	_	
	of the license and licensed busi		
2.	The full and complete source of mousiness form		
	(Proof of source of funds	must be documente	ed and attached hereto.)
3.	I certified that there is no other additional funding from any source used by me to purchase the above license and licensed business.		
4.	I am the transferee of the above lithat I am aware of all obligations Manufactures, Wholesalers, District or the obligations have been or with the sale of the licensed business.	ons outstanding to Neibutors, and that I have	ew Jersey Alcoholic Beverage either assumed such obligations
Nota	ry		
Swor	n and subscribed to before		
me this day of		, 20	