

## **Ownership Information**

#### This is important:

- Submitting an application containing false, misleading, or incomplete information may be groundsfor denial or license cancellation, revocation, or suspension.
- A person who knowingly makes a false statement in connection with applying for or renewing a license may be subject to criminal prosecution.

If you are in doubt as to how to respond to these questions, full and honest disclosure is highly recommended.

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	1.	Has any person listed on this form, or any officer, director, partner, trustee, or other person acting in a representative capacity for the applicant or license holder ever been convicted of a felony or misdemeanor offense in any in-state, out-of-state, or federal jurisdiction?  (If yes, submit Criminal History, Form LF606.)	Yes No
	2.	Has any person listed on this form, or any officer, director, partner, trustee, or other person acting in a representative capacity for the applicant or license holder, ever received a deferred adjudication for a felony or misdemeanor offense in any in-state,out of state, or federal jurisdiction?	Yes No
	3.	Has any person listed on this form, or any officer, director, partner, trustee, or other person acting in a representative capacity for the applicant or license holder, ever been convicted by a court martial or is currently the subject of a pending court martial under the Uniform Code of Military Justice? (If yes, submit <i>Criminal History</i> , Form LF606.)	Yes No

# TYPE OF BUSINESS (check only one box): Sole Proprietorship General Partnership Limited Partnership/LTD Other (Specify below) Limited Liability Company Corporation Limited Liability Partnership

### Ownership Percentage Instructions

- List all individuals and business entities with any ownership interest in the business (this includes sole proprietors) until total ownership indicated equals 100%.
- Only direct ownership of the business entity (applicant) applying for the license should be provided. If direct ownership is held by another business entity, do not list that business entity's ownership.

## Information Fields:

- · Name of Owner:
  - SOLE PROPRIETOR: list the legal name and SSN of the owner (for example, John Doe, Jr.)
  - GENERAL PARTNERSHIP: list the legal name and SSN of each owner (for example, John Doe Jr., Jane Doe)
  - ALL OTHERS: list the full legal name of each person (and his/her SSN) or business entity that has ownership.
  - If the applicant is a publicly traded or nonprofit corporation, please mark the appropriate box and complete that section by providing one officer/director in lieu of ownership information.
- Title: Examples Owner, President, CEO, Partner, General Partner, Member, etc.
- Driver License:
  - · Applies to individuals.
  - · Attach a copy of the driver license for each individual listed.
  - If the driver license was issued in a foreign country, provide that information.

Business Name:
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# Ownership Percentage

1.				
Name of Owner (Person or Business)			Title	% of Ownership
Date of Birth		Driver's License # and State	Expiration Date	SSN OR EIN
If this is a business, isit nonprofit?	NO			(if person) (if business)
If this is a business, is it PUBLICLY TRADED?	YES	NO		
2.				
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Name of Owner (Person or Business)			Title	% of Ownership
Date of Birth  If this is a business is it nonprofit?  YES	NO	Driver's License # and State	Expiration Date	SSN OR EIN (if person) (if business)
in this is a saciness, is it nonprone.	NO YES	NO		
If this is a business, is it PUBLICLY TRADED?	TES	NO		
3.				
Name of Owner (Person or Business)			Title	% of Ownership
				·
Date of Birth		Driver's License # and State	Expiration Date	SSN OR EIN
If this is a business, is it nonprofit?	NO		·	(if person) (if business)
If this is a business, is it PUBLICLY TRADED?	YES	NO		
4.				
Name of Owner (Person or Business)			Title	% of Ownership
Date of Birth		Driver's License # and State	Expiration Date	SSN OR EIN (if person) (if business)
If this is a business, is it nonprofit?	NO YES	NO		, , , , , , , , , , , , , , , , , , , ,
If this is a business, is it PUBLICLY TRADED?	150	NO		
5.				
Name of Owner (Person or Business)			Title	% of Ownership
Date of Birth		Driver's License # and State	Expiration Date	SSN OR EIN
If this is a business, is it nonprofit?	NO			(if person) (if business)
If this is a business, is it PUBLICLY TRADED?	YES	NO		
6.				
Name of Owner (Person or Business)			Title	% of Ownership
Date of Birth		Driver's License # and State	Expiration Date	SSN OR EIN (if person) (if business)
If this is a business, is it nonprofit?	NO	NO		( p = 1 = 1 )
If this is a business, is it PUBLICLY TRADED?	YES	NO		

# OWNERSHIP PERCENTAGE TOTALING 100% IS REQUIRED

All persons listed must provide SSN.

#### Privacy Statement

The Texas Department of Motor Vehicles maintains information collected through this form. With few exceptions, Texas Government Code Chapter 559 entitles you to: (a) request to be informed about this information, and (b) have TxDMV correct information about you that is incorrect. Chapter 552 of the Government Code entitles you to receive and review this information. You must submit requests for information in writing. Requests may be submitted via email to OGCOpenRecords@TxDMV.gov; by fax to (512) 465-4112; or by mail or in person to: TxDMV, OGC Open Records, 4000 Jackson Ave., Austin, TX 78731. For more information, please call TxDMV at (888) 368-4689.