



## **CHANGE OF HOURS APPLICATION**

Please read all questions carefully before answering. Print clearly and answer all questions. If a question does not apply, write "Not Applicable".

Completed applications may be submitted by email, mail, or drop-box.

- Email | abc@dc.gov
- Mail | ABRA, 2000 14th Street NW, Suite 400 South, Washington, DC 20009
- Drop-Box | A secure drop box is located directly outside the entrance to ABRA's physical office located at the above address. Building access is available from Monday-Friday, 8:30 a.m.-4:00 p.m.

### **Instructions for the Change of Hours Application:**

1. Print the licensee's name as it appears on the ABC license.
2. Print the license number.
3. Print the license class/type.
4. Print the address as it appears on the ABC license.
5. Print the licensee's e-mail address.
6. Print the licensee's business telephone number.
7. Print the licensee's cell phone number.
8. Please check the appropriate box to indicate whether the change of hours request is for the Premises, Sidewalk Café, Summer Garden, Entertainment Endorsement, or Carry-out and Delivery. Please check one. If you have more than one change of hours request (e.g., a change of hours request for the Premises and the Sidewalk Café), please complete and attach the Multiple Change of Hours Application.
9. List the current approved hours of operation, hours of alcoholic beverage sales and consumption, and hours of live entertainment, if applicable.
10. List the requested hours of operation, hours of alcoholic beverage sales and consumption, and hours of live entertainment, if applicable.
11. Please check the appropriate box ("Yes" or "No") whether you have a Voluntary Agreement. If yes, please attach a copy.
12. Certification: You must sign the certification, which states, "Certification: I hereby certify under penalty of perjury that the information in this application is true and correct. I also certify that the above named applicant is the true and actual owner of the business."
13. Please answer the question: In what language do you need vital documents translated?

### **Instructions for the Multiple Change of Hours Application:**

Please complete and attach the Multiple Change of Hours Application if you have more than one change of hours request.

1. Print the licensee's name as it appears on the ABC license.
2. Print the license number.
3. Print the license class/type.
4. Please check the appropriate box to indicate whether the change of hours request is for the Premises, Sidewalk Café, Summer Garden, or Entertainment Endorsement. Please check one.
5. List the current approved hours of operation, hours of alcoholic beverage sales and consumption, and hours of live entertainment, if applicable.
6. List the requested hours of operation, hours of alcoholic beverage sales and consumption, and hours of live entertainment, if applicable.

*Please complete sections 7 through 9 if you have an additional change of hours request.*

#### **SPECIAL NOTICE**

The District of Columbia will provide the appropriate services and auxiliary aids, including sign language interpreters, whenever necessary to ensure effective communication with members of the public who are deaf, hearing impaired or who have other disabilities affecting communications. Requests for services and auxiliary aids should be made at least ten days prior to any scheduled hearing. Please notify the ADA Coordinator at (202) 442-4423.



**CHANGE OF HOURS APPLICATION**

**OFFICIAL USE ONLY**

License Number:		Date Accepted:		Accepted By:	
Issue Date:	From:	To:			
Date Approved by Board: / /	Initial: →				
Date Denied by Board: / /	Initial: →				

**TO BE COMPLETED BY APPLICANT**

1. Licensee's Entity Name (Corporation, LLC, etc.):		2. License Number:	3. Trade Name:	4. License Class/Type:
5. Address as it appears on the ABC license:			6. E-mail Address:	
7. Business Telephone Number:		8. Cell Phone Number:		
9. Change of Hours Request for: <i>(Please check one. If additional requests are needed, please complete the Multiple Change of Hours Application)</i>				
Premises	Sidewalk	Summer Garden	Entertainment Endorsement	Carry-out and Delivery

10. List <i>Approved</i> Hours Below:				
Days	Hours of Operation	Hours of Alcoholic Beverage Sales and Consumption	Hours of Live Entertainment (beginning after 6:00 p.m.)	Carry-out and Delivery
Sunday	From _____ To _____	From _____ To _____	From _____ To _____	From _____ To _____
Monday	From _____ To _____	From _____ To _____	From _____ To _____	From _____ To _____
Tuesday	From _____ To _____	From _____ To _____	From _____ To _____	From _____ To _____
Wednesday	From _____ To _____	From _____ To _____	From _____ To _____	From _____ To _____
Thursday	From _____ To _____	From _____ To _____	From _____ To _____	From _____ To _____
Friday	From _____ To _____	From _____ To _____	From _____ To _____	From _____ To _____
Saturday	From _____ To _____	From _____ To _____	From _____ To _____	From _____ To _____

11. List <i>Requested</i> Hours Below:				
Days	Hours of Operation	Hours of Alcoholic Beverage Sales and Consumption	Hours of Live Entertainment (beginning after 6:00 p.m.)	Carry-out and Delivery
Sunday	From _____ To _____	From _____ To _____	From _____ To _____	From _____ To _____
Monday	From _____ To _____	From _____ To _____	From _____ To _____	From _____ To _____
Tuesday	From _____ To _____	From _____ To _____	From _____ To _____	From _____ To _____
Wednesday	From _____ To _____	From _____ To _____	From _____ To _____	From _____ To _____
Thursday	From _____ To _____	From _____ To _____	From _____ To _____	From _____ To _____
Friday	From _____ To _____	From _____ To _____	From _____ To _____	From _____ To _____
Saturday	From _____ To _____	From _____ To _____	From _____ To _____	From _____ To _____

12. Do you have a Voluntary Agreement?  Yes  No *If yes, please attach a copy.*

13. **Certification:** *I hereby certify under penalty of perjury that the information in this application is true and correct. I also certify that the above named applicant is the true and actual owner of the business.* (If the applicant is a Sole Proprietor, the individual must sign, if Partnership, each Partner must sign, if Corporation, the President or Vice President must sign, if Limited Liability Company, the Managing Member must sign below.)

Print Name: \_\_\_\_\_

Signature \_\_\_\_\_ Subscribed and sworn to before me \_\_\_\_\_ My commission Expires on \_\_\_\_\_  
on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ Notary Public

Print Name: \_\_\_\_\_

Signature \_\_\_\_\_ Subscribed and sworn to before me \_\_\_\_\_ My commission Expires on \_\_\_\_\_  
on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ Notary Public

14. In what language do you need vital documents translated?

**SPECIAL NOTICE**



**MULTIPLE CHANGE OF HOURS APPLICATION**

1. Licensee's Entity Name (Corporation, LLC, etc.):	2. License Number:	3. Trade Name:	4. License Class/Type:
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5. Change of Hours Request for: *(Please check one.)*

Premises                     
  Sidewalk                     
  Summer Garden                     
  Entertainment Endorsement                     
  Carry-out and Delivery

6. List *Approved* Hours Below:

Days	Hours of Operation	Hours of Alcoholic Beverage Sales and Consumption	Hours of Live Entertainment (beginning after 6:00 p.m.)	Carry-out and Delivery
Sunday	From _____ To _____	From _____ To _____	From _____ To _____	From _____ To _____
Monday	From _____ To _____	From _____ To _____	From _____ To _____	From _____ To _____
Tuesday	From _____ To _____	From _____ To _____	From _____ To _____	From _____ To _____
Wednesday	From _____ To _____	From _____ To _____	From _____ To _____	From _____ To _____
Thursday	From _____ To _____	From _____ To _____	From _____ To _____	From _____ To _____
Friday	From _____ To _____	From _____ To _____	From _____ To _____	From _____ To _____
Saturday	From _____ To _____	From _____ To _____	From _____ To _____	From _____ To _____

7. List *Requested* Hours Below:

Days	Hours of Operation	Hours of Alcoholic Beverage Sales and Consumption	Hours of Live Entertainment (beginning after 6:00 p.m.)	Carry-out and Delivery
Sunday	From _____ To _____	From _____ To _____	From _____ To _____	From _____ To _____
Monday	From _____ To _____	From _____ To _____	From _____ To _____	From _____ To _____
Tuesday	From _____ To _____	From _____ To _____	From _____ To _____	From _____ To _____
Wednesday	From _____ To _____	From _____ To _____	From _____ To _____	From _____ To _____
Thursday	From _____ To _____	From _____ To _____	From _____ To _____	From _____ To _____
Friday	From _____ To _____	From _____ To _____	From _____ To _____	From _____ To _____
Saturday	From _____ To _____	From _____ To _____	From _____ To _____	From _____ To _____

8. Change of Hours Request for: *(Please check one.)*

Premises                     
  Sidewalk                     
  Summer Garden                     
  Entertainment Endorsement                     
  Carry-out and Delivery

9. List *Approved* Hours Below:

Days	Hours of Operation	Hours of Alcoholic Beverage Sales and Consumption	Hours of Live Entertainment (beginning after 6:00 p.m.)	Carry-out and Delivery
Sunday	From _____ To _____	From _____ To _____	From _____ To _____	From _____ To _____
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Tuesday	From _____ To _____	From _____ To _____	From _____ To _____	From _____ To _____
Wednesday	From _____ To _____	From _____ To _____	From _____ To _____	From _____ To _____
Thursday	From _____ To _____	From _____ To _____	From _____ To _____	From _____ To _____
Friday	From _____ To _____	From _____ To _____	From _____ To _____	From _____ To _____
Saturday	From _____ To _____	From _____ To _____	From _____ To _____	From _____ To _____

10. List *Requested* Hours Below:

Days	Hours of Operation	Hours of Alcoholic Beverage Sales and Consumption	Hours of Live Entertainment (beginning after 6:00 p.m.)	Carry-out and Delivery
Sunday	From _____ To _____	From _____ To _____	From _____ To _____	From _____ To _____
Monday	From _____ To _____	From _____ To _____	From _____ To _____	From _____ To _____
Tuesday	From _____ To _____	From _____ To _____	From _____ To _____	From _____ To _____
Wednesday	From _____ To _____	From _____ To _____	From _____ To _____	From _____ To _____
Thursday	From _____ To _____	From _____ To _____	From _____ To _____	From _____ To _____
Friday	From _____ To _____	From _____ To _____	From _____ To _____	From _____ To _____
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