STATE OF CONNECTICUT **DEPARTMENT OF CONSUMER PROTECTION** LIQUOR CONTROL DIVISION

Telephone: (860) 713-6210 Email: dcp.liquorcontrol@ct.gov Website: www.ct.gov/dcp/liquorcontrol



DISCLAIMER STATEMENT

IN TERMS OF A: LOAN (Name and Relationship) IN TERMS OF A: LOAN (Name and Relationship) WITHDRAWL OF CO-OWNED FUNDS (Type of Business) IN TO BE USED FOR THE PURPOSE OF PURCHASING THE (Type of Business) KNOWN AS LOCATED AT (Number & Street) WE SHALL HAVE NO FINANCIAL INTEREST IN SAID BUSINESS. I/WE PRESENTLY DO NOT HEANY INTEREST, FINANCIAL OR OTHERWISE, IN ANY LIQUOR BUSINESS EXCEPT THE FOLLO (If None, print "None") FUNDS WHERE DERIVED FROM (Account Type, Account Number, Bank Name) IF THE PLACE WHERE THE MONEY WAS MAINTAINED IS IN MORE THAN ONE PERSON'S ALL INDIVIDUALS MUST COMPLETE A DISCLAIMER STATEMENT AND HAVE SIGNATURES NOTARIZED. I do hereby affirm that the information contained in this affidavit is true to the best of my knowledg Signature:	APPLICANT:		DATE:
(Name of Lender/s or Account co-owner) (Date of Birth) HAVE RELEASED THE SUM OF TO	I/WF		
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