

NON-CIGARETTE TOBACCO RETAILER LICENSE  
AFFIDAVIT OF TRANSFER

Licensee hereby authorizes the transfer of its Non-Cigarette Tobacco Retailer License to the Applicant, its agent, or a company, corporation, partnership or other business entity to be formed by the Applicant.

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Name of Non-Cigarette Tobacco Business & License Number

\_\_\_\_\_  
Owner's Name

\_\_\_\_\_  
Address

\_\_\_\_\_  
Business Phone

\_\_\_\_\_  
email

**Seller(s):**

\_\_\_\_\_  
Signature

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

\_\_\_\_\_  
Signature

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

**Buyer(s):**

\_\_\_\_\_  
Signature

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

\_\_\_\_\_  
Signature

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

MUST BE SIGNED IN THE PRESENCE OF A NOTARY:

\_\_\_\_\_  
Affiant's Signature

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_.

\_\_\_\_\_  
Notary Public

\_\_\_\_\_  
Expiration Date

(Notary Seal)