

**INSTRUCTIONS FOR COMPLETING
DBPR ABT- 6010
DIVISION OF ALCOHOLIC BEVERAGES AND TOBACCO
APPLICATION FOR CHANGES TO POOL BUYING GROUPS**

If you have any questions or need assistance in completing this application, please contact the Division of Alcoholic Beverages & Tobacco at (850) 488-8284. Please send your completed application to:

Department of Business and Professional Regulation
2601 Blair Stone Road
Tallahassee, FL 32399-1021
Attention: Pool Buying Section

GENERAL INSTRUCTIONS

Please complete all information. All questions are applicable and must be answered fully and truthfully. You must provide an original application and supporting documentation (if applicable).

Contact Person

All communications regarding your application will be sent to you as the pool buying agent at the mailing or email address provided. However, if you would like for us to communicate with someone other than yourself regarding your application, please provide the name and contact information for that person in the "Pool Buying Group Information" section. Your named contact person will be permitted to make changes or corrections to the application paperwork on your behalf and we will communicate directly with them regarding any application issues or deficiencies, and you will not be copied by the division with the correspondence. A copy of this application will be emailed or mailed to you indicating the final agency action and, if approved, a new member may participate in pool purchases.

APPLICATION REQUIREMENTS

Signatures

All signatures must be original. This form must be signed and dated by the authorized pool buying group agent. The pool group agent must be a member of the pool buying group and have a current retail alcoholic beverage license that permits the sale of all types of alcoholic beverages sold by its members.

APPLICATION CHECKLIST

| TRANSACTION | APPLICATION REQUIREMENTS |
|--|--|
| Addition to Pool Group | <input type="checkbox"/> Complete DBPR ABT-6010 Division of Alcoholic Beverages and Tobacco Application for Changes to a Pool Buying Group |
| Deletion from Pool Group | <input type="checkbox"/> Complete DBPR ABT-6010 Division of Alcoholic Beverages and Tobacco Application for Changes to a Pool Buying Group |
| Change of Agent Mailing Address | <input type="checkbox"/> Complete DBPR ABT-6010 Division of Alcoholic Beverages and Tobacco Application for Changes to a Pool Buying Group |
| Change of Pool Buying Agent | <input type="checkbox"/> Complete DBPR ABT-6010 Division of Alcoholic Beverages and Tobacco Application for Changes to a Pool Buying Group |
| Change of Pool Name | <input type="checkbox"/> Complete DBPR ABT-6010 Division of Alcoholic Beverages and Tobacco Application for Changes to a Pool Buying Group |
| Revised or Amended Agreement | <input type="checkbox"/> Complete DBPR ABT-6010 Division of Alcoholic Beverages and Tobacco Application for Changes to a Pool Buying Group <input type="checkbox"/> Submit Revised or Amended Agreement |

**DBPR ABT-6010 – Division of Alcoholic Beverages and Tobacco
Application for Changes to Pool Buying Groups**

**STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION**

**DBPR Form
ABT-6010
Revised 03/2013**

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Attention: Pool Buying Section

| SECTION 1 - CHECK TRANSACTION REQUESTED | |
|--|--|
| Transaction Type: | |
| <input type="checkbox"/> Addition to Pool Buying Group | <input type="checkbox"/> Change of Pool Buying Group Agent |
| <input type="checkbox"/> Deletion from Pool Buying Group | <input type="checkbox"/> Change of Pool Buying Group Name |
| <input type="checkbox"/> Change of Pool Buying Group Agent Mailing Address | <input type="checkbox"/> Revised/Amended Pool Buying Agreement (Submit Copies of New Agreement) |

| SECTION 2 - POOL BUYING GROUP INFORMATION | | | |
|--|------|--------------------------|----------|
| Full Name of Pool Buying Group | | Pool Buying Group Number | |
| Pool Buying Agent's Name | | Telephone Number ext. | |
| Pool Buying Agent's Business E-mail Address (optional) | | | |
| Mailing Address (Street or P.O. Box) | City | State FL | Zip Code |
| Contact Person | | Telephone Number ext. | |
| E-Mail Address (Optional) | | | |
| Mailing Address (Street or P.O. Box) | City | State FL | Zip Code |

| SECTION 3 - POOL BUYING GROUP ADDITIONS OR DELETIONS | | |
|--|--|--|
| <i>If adding a temporary license holder to the group, a copy of the temporary license must be attached</i> | | |
| Full Name of Licensee | License Number | <input type="checkbox"/> Permanent License <input type="checkbox"/> Temporary License |
| Trade Name (D/B/A) | <input type="checkbox"/> Addition <input type="checkbox"/> Deletion | Date Added/Deleted |
| Full Name of Licensee | License Number | <input type="checkbox"/> Permanent License <input type="checkbox"/> Temporary License |
| Trade Name (D/B/A) | <input type="checkbox"/> Addition <input type="checkbox"/> Deletion | Date Added/Deleted |
| Full Name of Licensee | License Number | <input type="checkbox"/> Permanent License <input type="checkbox"/> Temporary License |
| Trade Name (D/B/A) | <input type="checkbox"/> Addition <input type="checkbox"/> Deletion | Date Added/Deleted |
| Full Name of Licensee | License Number | <input type="checkbox"/> Permanent License <input type="checkbox"/> Temporary License |
| Trade Name (D/B/A) | <input type="checkbox"/> Addition <input type="checkbox"/> Deletion | Date Added/Deleted |

(Attach additional sheets as necessary)

SECTION 4 - CHANGES TO POOL BUYING GROUP

Change of Pool Buying Agent (Enter New Agent's Name and Information)

Full Name of Licensee

License Number

Trade Name (D/B/A)

Permanent License
 Temporary License

Change of Pool Buying Group Name

New Pool Buying Group Name

Change of Agent Mailing Address

Change of Authorized Contact Mailing Address

Street Address

City

State

Zip Code

AUTHORIZED SIGNATURE OF POOL AGENT

Date _____

 Authorized Signature of Pool Agent

FOR DIVISION USE ONLY

- Approved
- Disapproved

Reason for Disapproval:

Date _____ Signature _____