



This continuation page is in connection with a:

- New Independent Entity                       Branch                       On-site Branch                       Ownership Change
- Corporate Travel Department                       Miscellaneous Change
- Other \_\_\_\_\_

Provide the ARC code number or the “pending number” assigned to the application, if applicable: \_\_\_\_\_

Provide the full legal name of Applicant: \_\_\_\_\_

**IMPORTANT: The total percent of ownership for the applicant travel agency must equal 100%. The applicant travel agency ownership may be divided between individuals and partnerships, corporations and/or limited liability entities. Make certain if percent of ownership is listed in both Table 1 and Table 2 the combination of percent of shares of both tables equal \$100%. If there is a total of more than 100% (collectively), a discrepancy exists.**

**Table One**, list all natural persons who are owners, officers, directors, partners, shareholders, LLC managers, or members of the applicant travel agency. Please include the name, title, Social Security Number (SSN), for each person listed in Table 1. If one or more of the persons listed below is a shareholder of the applicant travel agency, provide the percent of shares owned by each such person.

**Table Two**, list all, if any, business entities which are partners, shareholders, or members of the applicant travel agency. Provide the name(s) of that business entity and Federal Taxpayer ID Number for each owning business entity. If one or more of the owning entity(s) listed below is a shareholder of the applicant travel agency; provide the percent of shares of the applicant travel agency owned by each such owning entity. Provide a separate list of the owners, LLC managers or members, partners or shareholders and, if applicable, all corporate officers for each owning entity. If one or more of the owning entity(s) is a **non-US corporation**, please select the applicable response.

PHF	First Name, Middle Name, Last Name	Title	Social Security Number	% Shares owned by each Individual
<input type="checkbox"/>				
<input type="checkbox"/>				
<input type="checkbox"/>				
<input type="checkbox"/>				

**Insert and complete a Personal History Form {PHF} (ARC Form 682) for each individual named in Table 1. REMEMBER: Print the PHF for each individual, have each individual sign the form and have the form properly notarized to submit with the application.**



Name of Owning Entity	Type of Owning Entity (Corp, LLC, Ptnrshp)	Non-US Corp (Yes to No)	Federal Taxpayer ID Number	% Shares of ownership if applicant is corporation

*Provide corporate documentation or Articles of Organization for all entities listed in Table 2.*

**To list additional owners, insert another ARC Form 656.**