



# Liquor License Application

Applicant's name \_\_\_\_\_

DBA business name \_\_\_\_\_ Phone \_\_\_\_\_

Business address \_\_\_\_\_

Street

City

State

ZIP

Applying as a  sole owner  corporation  limited liability company  partnership

1. Select the business type that best describes the type of business licensed/to be licensed

- Tavern – defined as any licensed premises that sells liquor by the drink which derives the majority of its annual gross sales from alcoholic beverages and does not qualify to be categorized as a restaurant-bar, amusement place or place of entertainment
- Bar-restaurant – defined as an establishment having a restaurant or similar facility on the premises which derives 30 percent or more of its annual gross sales from the sale of prepared meals and food made for immediate consumption as compared to the annual gross sales of alcoholic beverages sold for immediate consumption.
- Caterer – defined as any establishment whose primary business is the preparation of food and drinks for consumption away from the licensed premises. A caterer must derive 50 percent or more of its annual gross sales from the sale of prepared meals and food consumed at other approved premises.
- Drugstore – defined as a retail store centrally featuring a pharmacy that dispenses prescription medication and sells over-the-counter medications as well as other miscellaneous items which includes but is not limited to products such as candy, cosmetics, cleaning supplies, light refreshments, magazines and paperback books
- Grocery store – defined as a retail business occupying a space that is at least 15,000 square feet, that primarily stocks a range of everyday items which includes but is not limited to groceries, snack foods, confectionery, toiletries, soft drinks, tobacco products, personal electronics, home essentials, and clothing, that derives at least 70% of its sales from products other than liquor
- Convenience-grocery store – defined as a small retail business that primarily stocks a range of everyday items which includes but is not limited to groceries, snack foods, confectionery, toiletries, soft drinks, tobacco products, magazines and newspapers
- General merchandising store – defined as a retail business that sells a number of lines of merchandise which may include but is not limited to dry goods, apparel and accessories, furniture and home furnishings, small wares, hardware, toys, automotive products and food
- Confectionery store – defined as a retail business that primarily sells bakers and sugar confections which includes but is not limited to sweets, candies, candied nuts, chocolates, chewing gum, pastillage, sweet pastries, cakes and other baked goods
- Liquor store – defined as a retail business that primarily sells pre-packaged alcoholic beverages
- Other \_\_\_\_\_

2. Proposed days and hours of operation \_\_\_\_\_

3. The business will provide the following  breakfast  lunch  dinner  **not applicable**

4. I am applying for the following (**check all that apply**)

- change in ownership of an existing liquor licensed business (If there are no licensing changes, proceed to number 11)
- original liquor license  expansion of premises  DBA name change  transfer of location
- Sunday liquor license  change of managing officer  upgrade of license  manufacturer
- extended hours (3 a.m.) permit (sales-by-drink **only**)  annual catering permit
- wholesaler  other \_\_\_\_\_

5. Type of license for which you are applying (**check all that apply**)

- full sales-by-drink  malt liquor/light wine sales-by-drink (14% alcohol or less)
- full sales-by-package  malt liquor sales-by-package (Sunday license included)
- tasting license – **only for package licenses**  full alcoholic beverage wholesaler
- 22% or less alcoholic beverage wholesaler  malt liquor wholesaler (sales to retailers or wholesalers)
- full liquor manufacturer  22% or less manufacturer
- beer manufacturer  wine / brandy manufacture
- microbrewery  C.O.L. license

**All application fees must be submitted with the application – see the corresponding checklist for the listed application fee**

6. If you are applying for a **Sunday license**, please indicate the license type  
 Retail sales-by-drink Sunday       Retail sales-by-package Sunday       **not applicable**
7. If you are applying for an **extended hour's permit**, please indicate business type  
 Retail sales-by-drink business       Retail sales-by-drink convention hotel/motel       **not applicable**
8. Indicate all **entertainment** to be provided. If applying for a **change in live entertainment, or, change in the frequency of the live entertainment**, indicate below  
 video games / amusement devices       pool table       darts       pinball       jukebox  
 dancing/dance hall       DJ       semi-nude dancers (must have zoning clearance)  
 live music  
 live entertainment (describe) \_\_\_\_\_

**Frequency of live entertainment** to be held **indoors** will be no more than \_\_\_\_ days per week

**Outdoor entertainment provided:**  DJ  live music  dancing  other \_\_\_\_\_  
 live entertainment (describe) \_\_\_\_\_

**Frequency of live entertainment** to be held **outdoors** will be no more than \_\_\_\_ days per week

**Total number of all multi coin-operated amusement devices** \_\_\_\_\_ (A multi coin-operated machine or device is one which is capable of being played by the insertion therein of more than one coin, disc or other insertion piece, or operated thereby winning free plays or free games, or for the purpose of increasing the number of free plays or free games which may be won)

**Total number of billiard/pool tables** \_\_\_\_\_ **Total number of all other coin-operated amusement devices** \_\_\_\_\_

9. Interior occupant capacity \_\_\_\_\_ Exterior occupant capacity (if used for customer seating) \_\_\_\_\_
10. Interior square feet \_\_\_\_\_ Exterior square feet \_\_\_\_\_ how many **total** floors will be licensed? \_\_\_\_\_  
Will one or more exterior patio(s) be licensed?  yes  no Location(s) (circle) **north south east west**  
Will one or more exterior deck(s) be licensed?  yes  no Location(s) **north south east west roof**

-----**This section ONLY: Current licensees please write "on file" next to any question where applicable**-----

11. Managing officer's name \_\_\_\_\_ E-mail address \_\_\_\_\_  
Home phone \_\_\_\_\_ Work phone \_\_\_\_\_ Mobile phone \_\_\_\_\_  
Address \_\_\_\_\_  
Street City State ZIP

12. Do you currently or intend to employ any person who has been convicted of a felony?  yes  no  
If yes, give details \_\_\_\_\_

13. Do you own or intend to purchase this business?  yes  no If yes, provide the following information  
Date of purchase \_\_\_\_\_ Purchase price \$ \_\_\_\_\_

14. Do you rent or lease the premise?  yes  no If yes, provide the following information  
Landlord's name \_\_\_\_\_ Daytime Phone \_\_\_\_\_  
Address \_\_\_\_\_  
Street City State ZIP  
Monthly rent or lease payment amount \$ \_\_\_\_\_ Term of rent or lease agreement \_\_\_\_\_

15. Property owner's name \_\_\_\_\_  
Address \_\_\_\_\_  
Street City State ZIP

----- **Financial information** -----

16. Total investment amount to set up the proposed business \$ \_\_\_\_\_  
Source of funds \_\_\_\_\_
17. List the names of all person(s), firms or corporations that have provided or will provide money to purchase or set up

this business and indicate amounts \_\_\_\_\_

18. Does or will the former owner have any interest, directly or indirectly, in this business? [ ] yes [ ] no [ ] n/a

If yes, give details \_\_\_\_\_

19. Does your landlord have any interest, directly or indirectly, in this business? [ ] yes [ ] no [ ] n/a

If yes, give details \_\_\_\_\_

20. List all corporations, limited liability companies and partnerships for which you and all owners of this business (the members of the corporation, LLC or partnership) are members or are directly or indirectly involved

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

----- If the business is a **corporation**, complete this section -----

21. Name of corporation \_\_\_\_\_

State of incorporation \_\_\_\_\_ Date of incorporation \_\_\_\_\_

22. List the names and titles of all corporate officers (attach additional sheet if necessary)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

23. List the names of all stockholders, the number of shares held, and percentage of total ownership of the corporation for each stockholder who holds more than 10 percent of the capital stock (attach additional sheet if needed)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

----- If the business is a **limited liability company**, complete this section -----

24. Name of limited liability company \_\_\_\_\_

State of organization \_\_\_\_\_ Date of organization \_\_\_\_\_

25. List the names of all members and percentages of each LLC member's interest (attach additional sheet if needed)

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

----- If the business is a **partnership**, complete this section -----

26. List names of general and limited partners, and the number of units owned by each (attach additional list if necessary) \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_



