



OFFICIAL USE ONLY

Date of Application _____ License Application # _____

_____ Retail Wine (Off-premises, only) _____ New
_____ Retail Beer (Off-premises, only) _____ Transfer
_____ Restaurant (On-premises liquor, beer, wine)
_____ Restaurant (On-premise beer)
_____ Restaurant (On-premise wine)
_____ Other _____

Confidential
(Please Type or Print Legibly)

**MONROEVILLE ALCOHOLIC BEVERAGE
RETAIL LICENSE APPLICATION**

**Submit application to: City of Monroeville
Attn: Mary Jackson
P. O. Box 147
Monroeville, AL 36461-0147**

1. Applicant Information

Name of applicant _____

Doing Business as: _____

Corporate name _____

Mailing Address _____

Residential Address _____

Social Security # _____ Drivers License # _____

Date of birth _____ Federal ID # _____

Telephone # _____ US Citizen _____ Yes _____ No

2. Name and address of individual applicant or if a partnership, association, incorporated enterprise or corporation, the names and residence of the partners, members, officers and directors. (*Attach separate sheet if necessary*).

Name _____

Present mailing address _____

Present residential address _____

Length of time at present address _____ Date of Birth _____

Title _____

Name _____

Present mailing address _____

Present residential address _____

Length of time at present address _____ Date of Birth _____

Title _____

Name _____
Present mailing address _____
Present residential address _____
Length of time at present address _____ Date of Birth _____
Title _____

Note: If a corporation, give place and date of incorporation or issuance of certificate of authority to do business in Alabama

Book: _____ Page: _____ Date: _____ County: _____

Length of time in business at this location _____

3. Owner of real estate for which license is desired:

Name _____
Mailing Address _____

4. Names and addresses of all lessees or sub-lessees:

Name _____
Mailing Address _____

Name _____
Mailing Address _____

5. Attach a copy of any lease agreement under which the applicant has the right of possession if the applicant is not the owner of the property. (*The amount of monthly rental or other compensation to be paid by lessee under said lease may be struck out on said attached copy*).

6. Give a description of the premises for which license is desired and a description or plan of that part of the hotel, restaurant, or private club where it is proposed to keep and sell liquor:

7. Will any building renovations, remodeling or repairs be completed prior to opening your business at this address? Please explain:

8. List items sold within your business:

_____ Groceries	_____ Gasoline	_____ Tobacco Products
_____ Food Stuff	_____ Drugs (prescription & over the counter)	
_____ Cosmetics	_____ Food prepared on site	
_____ Other (list below all items, which comprise at least 10% of merchandise sales)		

For off-premise retail sales, at least 60% of sales must come from groceries, gasoline, foodstuffs, and general merchandise and must constitute the principal business of the licensed establishment within any 90-day period.

A restaurant must serve at least one meal per day for 5 days a week and the sale of meals and food shall constitute at least 50% of the gross receipts of the business within any 90-day period.

9. Is any one of the applicants, whether individual, member or partnership or association, or officers and directors of corporation or the corporation itself, in any manner financially interested directly or indirectly in the profits of any other class of business regulated under this ordinance and/or the alcoholic beverage licensing code of the State of Alabama? If so please state the extent of said interest, including name of such business

10. Has the owner or manager ever had an ABC license suspended, revoked or declined? Please explain:

11. Has the applicant made application before for a similar or other alcoholic beverage license? _____ Yes _____ No
If so, state disposition of such application: _____

12. Has applicant, or in the case of a partnership, association or unincorporated enterprise, any partner or member thereof, or in a case of corporation, any officer, director or stockholder thereof, had during the three years immediate preceding the date of this application, a license for the sale of spirituous or vinous liquors, fortified wine or table wine, or malt or brewed beverages revoked or suspended by any governmental authority? _____ Yes _____ No

13. List below, the court records for violations, if any, of each applicant, partner, or member officer, member of the board of directors, landlord and manager. (Do not include traffic violations, except DUI and reckless driving). If no record exists, state NONE. Attach an extra sheet, if necessary.

<u>Name:</u>	<u>Violation charged:</u>	<u>Court:</u>	<u>Date</u>	<u>Disposition</u>

14. Each applicant for a Club retail liquor license shall also file with, and as part of the application the following:

- A. A certified copy of the “Certificate of Incorporation” and the constitution and/or bylaws of such club.
- B. A verified list of the paid-up members of such club at the time of the application, together with the resident address of each such paid-up member.
- C. The name and address of the manager of the club. If the person shown as manager of the club ceases to be such manager, then the club shall notify the City Clerk of the City of Monroeville within five (5) days of such change, together with the name and resident address of the new manager.
- D. A copy of any certificate from the United States Internal Revenue Service or Treasury Department concerning any exemption of the club from taxation.

15. In what commercial zoning classification according to the Zoning Ordinance of the City of Monroeville is the business located for which a license is desired?

- _____ CDB – Central Business District
- _____ B-1 Business District
- _____ B-2 Business District
- _____ Residential (Conditional use approval required for Private Club I)

NOTE: This form is to be signed by the owner, or in the case of a partnership, association, or unincorporated enterprise, by a partner or member thereof, or in case of a corporation by an executive officer.

I understand that false or misleading information given in this application is grounds for denial.

Signed _____

Title _____

The undersigned agrees, if issued a license as hereinbefore requested,
(1) to comply with all the provisions of the laws of Alabama and particularly Title 28, Code of Alabama, as now and hereafter amended,
(2) and to obey all rules and regulations promulgated by the Alabama Alcoholic Beverage Control Board (the "Board"), relative to the handling of the alcoholic beverages, and
(3) to obey all building, fire, zoning and alcoholic beverage ordinances for the City of Monroeville, and
(4) to allow any duly authorized agent of the Board and any duly commissioned law enforcement officer of the State of Alabama, Monroe County or the City of Monroeville, to enter and search without a warrant the licensed premises or any other building owned or occupied by the licensee in connection with, adjoining or adjacent thereto, whether connected or not, and whether used by the licensee as his private dwelling or not, at any time.

The undersigned understands that a violation of the state or city laws or rules and regulations of the Board may result in a suspension or revocation of his license.

STATE OF _____

Printed Name _____
Name of applicant

COUNTY OF _____

Title _____

- ___ Corporation
- ___ Partnership
- ___ Association
- ___ Individual Business Owner

Applicant for the alcoholic beverage license as requested hereby swears or affirms that he or she has read said application and all statements therein and that the facts set forth therein are true and correct.

Signed _____
Signature of Applicant

Date _____

STATE OF _____

COUNTY OF _____

Personally appeared before me, the undersigned Notary Public in and for the State of _____, the aforesigned applicant, who is known to me and has acknowledged the signing and attesting of the foregoing application to be his/her free act and deed.

Witness my hand and official seal on this the _____ day of _____, 20__.

Notary Public _____

(SEAL)

Commission Expires _____