LIQUOR LICENSE APPLICATION NEW LICENSES AND TRANSFERS

CITY OF FARMINGTON HILLS 31555 Eleven Mile Road, Farmington Hills, MI 48336 (248) 871-2410

The following application must be completed in full before consideration of a liquor license can be given. There is a \$1,000 non-refundable application fee, plus \$250.00 for each permit. This application is not considered complete until applicant has contacted and complied with the city's police department requirements. Please contact the police department at (248) 871-2770.

Pursuant to City Code requirements, the City Council shall not approve any new application for license to sell beer and/or wine and/or spirits for consumption on the premises, unless the use of said license shall be in connection with and incidental to a bona fide restaurant operation. The determination as to whether such operation exists shall be made by the City Council and a decision by a majority thereof shall be conclusive. (No license shall be granted unless approved by a roll call vote of five (5) members elect of the City Council).

| Applicant Name: | | Phone: | |
|---|--------------------|--------|----------------------------------|
| Home Address: | City | State | Email |
| Age:Citizenship | Birthplace | | |
| If Naturalized, time and place: | | | |
| License to be in the name of: | | | |
| Type of Licenses and Permits requested: | | | |
| Location of License Premises (address): | | | |
| Legal Description of Property (Lot Num | ber, I.D. Number): | | |
| Does applicant currently own the premis If no, please provide name of owner of p | | | (attach copy of lease agreement) |
| Length of time this business has been in | operation: | | |
| Relationship of applicant to business: _ | | | |
| Manager's Name, address and phone if n | ot applicant: | | |
| List all uses in addition to sale of alcohol | lic beverages: | | |
| Please provide a breakdown of anticipate Food and non-alcoholic beverages: Alcoholic beverages: Other revenues (describe): | ed revenues from: | | |

Attach a copy of your full menu

| Have you or do you presently operate any other establishments with a similar license or applied for another similar license other than described in this application? YES $__$ NO $__$ | | | | | |
|--|--|--|--|--|--|
| If yes, provide name and address of all establishments and the disposition of license/application: | | | | | |
| | | | | | |
| Is this a Partnership, Corporation or Limited Liability Company? YESNO | | | | | |
| If yes, please complete Attachment A with additional details about your business structure. | | | | | |
| Length of time applicant/partners/members/officers/directors have been in a business involving the sale of alcoholic liquor and/or beer and/or wine and/or spirits for consumption on or off premise: | | | | | |
| Please list an accurate record and history for the immediate preceding five (5) years of any liquor license complaint violations by the applicant, by a corporation or entity the applicant has worked for or had a substantial interest in, by a parent or subsidiary corporation of the applicant, or by any officers, directors, managers, members and partners of the applicant: | | | | | |
| | | | | | |
| Is this an existing building or new construction? | | | | | |
| If new construction, the estimated start date of construction: completion: | | | | | |
| Total cost to be expended by the licensee for the licensed premises: | | | | | |
| NOTE: Approval of a license shall be with the understanding that any necessary remodeling or new construction for the use of the license shall be completed within six (6) months of the action of the council or the Michigan Liquor Control Commission approving such license, whichever last occurs. | | | | | |
| Personal References: Name, address and phone number | | | | | |
| | | | | | |
| | | | | | |
| Business References: Name, address and phone number | | | | | |
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Applicant fully understands that should any of the above information prove to be inaccurate or untruthful, it will be grounds to deny applicant's request or revoke any approvals.

In the event of a change in any of the data or information required or furnished to the City after an on-premises license has been issued, the holder of the on-premises license shall notify the City Clerk of each such change within ten (10) days after such change occurs.

AFFIDAVIT:

I hereby affirm the above information to be true and accurate to the best of my knowledge. I hereby affirm that I will not violate any of the laws of the State of Michigan or of the United States or any ordinances of the City of Farmington Hills or the administrative rules of any regulatory agency in the conduct of this business. Applicant's Signature Applicant's Name - Please Print

| Applicant's Signature | Applicant's Name - Flease Finit |
|--|---------------------------------|
| Subscribed and sworn before me this day of, 20 | |
| Notary Public Signature - include stamp and/or seal of notary State of, County of My Commission expires: | |
| | |

APPLICANT MUST SUBMIT along with application and paid fees:

- ☐ ATTACHMENT A Business Information Sheet, if applicable
- ☐ ATTACHMENT B Signed agreement (for quota licenses only)
- ☐ Full food menu
- ☐ Information on training program for employees of establishment relative to the sale of alcohol, checking I.D., etc.
- A statement as to the applicant's character, experience, and financial ability to meet the obligations and business undertakings for which the license is to be issued, including a statement that the applicant and its officers, directors, managers, members, and partners, if any, have never been convicted for a violation of any laws or ordinances regarding the sale of alcoholic liquor or of a felony and are not disqualified to receive a license by reasons set forth in Chapter 4, Article II of the City's Code of Ordinances or the laws of the State of Michigan.
- Preliminary site plan showing the location of the proposed building, the architectural design, building elevations, off-street parking, lighting, refuse disposal facilities, and where appropriate, adequate plans for sound barriers and noise control as well as floor plans showing seating arrangements, interior design and the type of furniture and fixtures. If the building is already constructed, then in addition to the above the applicant shall furnish any proposed renovation to both the interior and exterior of the premises or any proposed building alterations, to meet and comply with all existing City Codes and Ordinances. Note all remodeling should be complete within 6 months of action of the City Council or State of Michigan
- ☐ Complete copy of a fully executed deed, lease or rental agreement, including any amendments, addendums, exhibits and other materials attached thereto, providing the applicant the exclusive right of use, occupancy, and possession of the proposed licensed premises, including use for the on-premises sale and consumption of alcoholic liquor by the applicant
- Driver's License, Social Security Card, Alien Card (if applicable), and Naturalization/Citizenship papers (if applicable) for Police Department review

***** FOR OFFICE USE ONLY *****

CHECKLIST FOR SUBMISSION:

| Signed, completed application, including all items on checklist |
|---|
| _ Signed, completed agreement (for quota licenses only) |
| Fees (\$1,000 non-refundable application fee; +\$250 per LCC permit (Dance, Entertainment, Sunday Sales, etc) |

ATTACHMENT A

Please fill out the information below that pertains to your business:

| IF PARTNERSHIP, | |
|---|--|
| Names/addresses: | |
| Citizenship | Birthplace |
| If naturalized, year and place | |
| Names/addresses: | |
| Citizenship | Birthplace |
| If naturalized, year and place | |
| Names/addresses: | |
| Citizenship | Birthplace |
| If naturalized, year and place | |
| Provide a copy of any partnership agreement | ent. |
| IF CORPORATION, Corporation name: | Date of Charter: |
| If corporation, state the object for which it | was formed: |
| Is this a private or public corporation? | |
| | nd proof of the corporation's active status and good standing with the State of Michigan. |
| • | ress citizenship, birthplace and if naturalized citizen, the time and place of naturalization of all stockholders, their addresses and the percentage of stock they each hold for more of corporate stock. |
| | of all members, managers, and assignees of membership interests, a copy of the articles of active status and good standing with the State of Michigan. <i>Use separate sheet if needed</i> |
| | |
| | |

ATTACHMENT B

Please fill out the following Agreement for Class C Liquor License only if your liquor license is from the City's Liquor License Quota. This includes all NEW on-premise Class C Liquor Licenses as well as transferred licenses. If you are uncertain, please contact the Clerk's Office at (248) 871-2410.