

CITY OF ROCHESTER



LIQUOR LICENSE APPLICATION

Pursuant to City of Rochester Liquor License Control Ordinance section 4-11, et seq., adopted January 14, 2008, each applicant for a new liquor license, a transfer into the City of a new liquor license, a transfer of ownership of an existing liquor license within the City of Rochester, and, any revision of an existing liquor license, a proposed significant deviation and/or physical alteration of a licensed establishment's existing operation, or any relocation of an existing liquor licensed establishment within the City of Rochester, shall make an application to the City as shall provide the following information.

Date: _____

_____ New Class C License

_____ Transfer Class C License

_____ Dance Permit

_____ Entertainment Permit

_____ Dance Entertainment Permit

_____ Other (please explain): _____

Application & Investigation Fee
of \$750.00 payable to
the City of Rochester
must accompany
this completed Application

Applicant's Name: _____

Address/City/State: _____

Phone number(s): _____

Birth Date/Place of Birth: _____

Citizenship: _____

If naturalized, year and place: _____

IF APPLICANT IS PARTNERSHIP, PLEASE COMPLETE THE FOLLOWING:

Partner's name: _____

Address/City/State: _____

Phone number(s): _____

Birth Date/Place of Birth: _____

Partner's Citizenship: _____

If naturalized, year and place: _____

Managing Partner's name: _____

Address/City/State: _____

Phone number(s): _____

Birth Date/Place of Birth: _____

IF A CORPORATION OR LIMITED LIABILITY COMPANY PLEASE COMPLETE THE FOLLOWING:

Names and addresses, including city and state, and dates of birth of all officers, directors or members, and, as to members of a limited liability company, please indicate which member or members is/are the managing member or members:

- 1.
- 2.
- 3.
- 4.
- 5.

(If additional space is needed, please indicate the same by reference to an attachment to this application providing supplemental information).

Address of location of proposed licensed premises: _____

Does Applicant presently own the business premises?: _____

If not, provide the name, address and telephone number of the owner of the business premises: _____

If the applicant does not own the business premises, describe the nature of applicant's interest in the business premises, i.e. does applicant have a lease, option to purchase or current pending agreement to purchase the business premises: _____

Legal description of the proposed business premises real property: _____

Provide tax parcel identification number: _____

Length of time business has been in operation, if applicable: _____

Has applicant or any of the partners, officers, directors or members, as applicable, ever been convicted of a felony?: _____

If the answer to the above question is yes, explain: _____

Has applicant previously applied for a liquor license? _____

If the answer to the above is yes, please indicate the year previously requested, the location of such business and whether or not the license was granted or denied, and, if the license was denied please provide explanation of the reasons for the denial:_____

Has the applicant, or any of the officers, directors, partners or members, as applicable, ever been convicted of a violation of federal or state law concerning the manufacture, possession or sale of alcoholic beverages?:_____

If the answer to the above question is yes, please provide details of individuals responsible, the nature of the offense and the date(s) of any such convictions:_____

Does the applicant have a current business?:_____

If the answer to the above question is yes, please provide the name, address and telephone number of such current business:_____

What is the length of time applicant's current business has been in operation?:_____

What is the nature of the applicant's current business, including whether or not the applicant holds any current liquor licenses in the operation of this current business, and describing all other goods and/or services provided by applicant's current business:_____

As to the above-described business, if applicable, list a complete history of any liquor license violations by applicant occurring within the last ten (10) years:_____

If applicable, list a complete history of any liquor license violations, license non-renewal and/or license revocation by any corporation, partnership, limited liability company, or other business entity owned and operated by applicant that have occurred within the last ten (10) years:_____

PROPOSED LIQUOR LICENSED ESTABLISHMENT:

Please attach a detailed site plan of the proposed project, which shall include the site location, exterior building elevations and floor plan for the project.

Regarding the proposed liquor establishment, please provide the following information:

Size of site:_____

Size (square footage) of building:_____

Size (square footage) of kitchen:_____

Seating capacity:_____

Size (square footage) of dance floor, if any:_____

Percentage of floor area for dining:_____

Percentage of floor area for bar: _____

Present zoning classification: _____

Required zoning: _____

Are applicant and the establishment in compliance with all local building, zoning, fire, sanitation, health laws, and other applicable city codes and ordinances: _____

Detail a complete history of any and all local building, zoning, fire, sanitation, health laws, and other city code and ordinance violations which either the property owner, applicant or applicant's officers, directors, partners and/or members have been found guilty of within the last ten (10) years: _____

Required parking: _____

State the effects that the issuance of the license will have on the adequacy of parking, vehicular circulation and infrastructure: _____

State any measures applicant will take to lessen any possible negative impact of the proposed business upon the community, including crowd control, nuisances, unlawful sale of alcohol to minors, etc.: _____

Cost of construction and/or remodeling: _____

Cost of total investment in the project: _____

Estimated dates of construction including start and finish estimates: _____

Number of estimated new employment opportunities created by the project: _____

Proposed hours of operation of the proposed establishment: _____

Estimated or actual, as applicable, ratio of food to alcohol sales as measured by the dollar amount of food to the dollar amount of alcohol sales (provide a detailed breakdown by separate attachment): _____

Does the applicant propose to incorporate outdoor dining? If so describe: _____

Nature or overall character of the proposed establishment (including any theme, if applicable), i.e. nightclub, dining, dance club, etc.: _____

Describe the anticipated, contemplated and proposed food and beverage menu (attached menu if available): _____

Will any other MLCC permits be sought or applied for? _____

If the answer to the above question is yes, identify what other permits will be sought or applied for: _____

Describe the surrounding neighborhood and other business developments and explain how the proposed establishment is suited for the proposed location: _____

Please provide a statement describing why the proposed project will be a positive improvement and an overall benefit to the City of Rochester: _____

EVIDENCE OF FINANCIAL RESPONSIBILITY:

Is the applicant, or any corporations, limited liability companies, partnerships, or other business entities, in which applicant has an interest, in default to the City of Rochester with respect to the nonpayment of taxes, utilities, special assessments or other obligations? _____

If the answer is yes, please explain the nature of such default(s), the reasons for such default and the proposed course of action intended to remedy such default(s), if any: _____

Amount of funds supplied by applicant: _____

Amount of funds to be financed: _____

Name, address and phone number of applicant's lender: _____

Applicant's references/phone number(s):

***NOTE: Please do not use elected officials or employees of the City of Rochester as references on this application.**

Personal references:

Business references:

1.

1.

2.

2.

3.

3.

Has the applicant completed any certified training programs with respect the sale and serving of intoxicating liquor, if yes, please list the name of the program and the date completed?: _____

Have the employees of applicant completed a certified training program with respect to the sale and serving of intoxicating liquor, if yes, please list the names and addresses of those employees completing the program and the name of the program and date completed as to each such employee? _____

Applicant acknowledges and agrees that Applicant has received and reviewed a copy of the City's Liquor License Control Ordinance and will be prepared to address all of its requirements and required showings to all reviewing bodies.

STATE OF MICHIGAN)
)
COUNTY OF OAKLAND)

APPLICANT HEREBY AFFIRMS THAT THE ANSWERS AND STATEMENTS PROVIDED IN THIS APPLICATION ARE TRUE TO THE BEST OF APPLICANT'S INFORMATION, KNOWLEDGE AND BELIEF, AND, THAT SHOULD IT BE HEREAFTER DISCOVERED THAT ANY OF THE INFORMATION PROVIDED IS INACCURATE OR FALSE, THE SAME SHALL BE GROUNDS FOR DENIAL OF THIS APPLICATION FOR A LIQUOR LICENSE OR GROUNDS TO REVOKE ANY PRIOR APPROVAL BASED UPON THE INFORMATION PROVIDED IN THIS APPLICATION.

APPLICANT FURTHER AFFIRMS THAT APPLICANT WILL NOT VIOLATE ANY OF THE LAWS OF THE STATE OF MICHIGAN OR OF THE UNITED STATES OR ANY ORDINANCES OF THE CITY OF ROCHESTER IN THE CONDUCT OF ITS BUSINESS, AND BY APPLICANT'S SIGNATURE BELOW, APPLICANT HEREBY ACKNOWLEDGES RECEIPT OF A COPY OF THE CITY OF ROCHESTER'S LIQUOR CONTROL ORDINANCE.

Applicant Signature:

_____(Printed Name)

Position/Title: _____

Date: _____

On this ____ day of _____, 20__, before me personally appeared,

Applicant herein, who being first duly sworn, says that he/she signed the above Application for Liquor License and all statements and representations contained therein are true and accurate to the best of Affiant's information, knowledge and belief.

_____, Notary Public
_____ County, Michigan, Acting in Oakland County
My Commission Expires: _____