

ALL RETAILERS & PRIVATE CLUBS

	TRADE	Name:	RM L-101-RET (1	2/2007)
	1.	Is the proposed location in a hotel or motel?	1. 🗌 YES	№ 🗆
ALL RETAILERS & PRIVATE CLUBS	2.	Does the applicant own or operate a hotel at the location for which this application is filed?	2. 🗌 YES	
	3.	Do you or anyone else at the location operate under a franchise agreement? If "YES," attach a copy.	3. 🗌 YES	
		Do you share the premises with another business entity?	4A. 🗌 YES	NO 🗌
	В.	If "YES," indicate the trade name(s) of business(es) and sales and use tax number(s) for other b		
		↓Trade Name	es & Use Tax N	umber
	5.	If operating under a lease , indicate:		
	A.	Expiration date(s)/Options:		
	В.	Monthly rental amount: \$		
	C.	Other fees and payments to landlord:		
		Are you operating under any concession, service or management agreement(s) that contain terms for services or management beyond property rental? If "YES," indicate the following and attach copy of agreement(s):	6A. ☐ YES	NO 🗆
		1. Expiration date(s)/Options:		
		2. Monthly fee: \$		
		3. Other fee(s) made to concession, service or management companies:		
		\$	- 1 101 01	
		4. If management company differs from lessor or sublessor, enter name below and complete fingiving name, address and officers of concession, service or management companies.	orm L-101-SL,	
	7	Name:		
	7.	Are there any agreements, excluding 5 and 6 above, which require payment by the applicant in a dollar figure or percentage of gross or net income of the business? If "YES," attach a copy.	7. YES	NO 🗌
IISE LICENSES/PERMITS	8.	Does the proposed licensed premises have running water, if available?	8. 🗌 YES	NO 🗌
	9.	Does the proposed premises have separate, free, properly identified toilets for males and females? If "NO," please answer the following:	9. 🗌 YES	NO 🗆
		A. Is location in a multitenant business complex that has free public restrooms for males and females available during your hours of operation? -OR-	A. 🗌 YES	NO 🗆
		B. Is location a restaurant that has 2,500 sq. ft. or less, less than 50% gross revenue from alcoholic beverages, an occupancy rating of 50 persons or less, and at least one properly marked restroom?	B. 🗌 YES	NO 🗆
	10.	Does the proposed licensed premises have adequate seating for customers?	10. 🗌 YES	
	11.	Provide the sales data for the last year of operation or projected yearly sales at the proposed lice	nsed premises:	
		Alcoholic Beverage Sales: \$ Other Sales: \$		
Ē		Food Sales: \$ Total Sales: \$ Is any property line of your premises within 300 feet of a residential address or established		
ON-PREMISE		neighborhood association?	12A. 🗌 YES	NO □
O	В.	If "YES," and if Food and Beverage Certificate is not applied for, notify each residential address or established neighborhood association. Attach a list of all addresses notified with a copy of the completed notice. (Refer to Instruction Booklet for sample of notice and instructions.)		
OR APPLICANTS IN MUNICIPALITIES WITH A POPULATION OF 1,500,000 OR MORE	FOR A	APPLICANTS IN MUNICIPALITIES WITH A POPULATION OF 1,500,000 OR MORE		
	13A.	Will your business be located within 300 feet of residence, church, school, day care or social		
	В	service facility when measuring in a straight line from the nearest point of the property line of the proposed location to the nearest point of the property line of any of these facilities?	13A. 🗌 YES	NO 🗆
		If "YES," is 75% or more of the applicant's actual or anticipated gross revenue from the sale of alcoholic beverages?	B. 🗌 YES	ΝО □
FOR A	C.	If answers to 13A and 13B are "YES," have you notified all tenants or property owners described in 13A within five days of filing the original application that an application has been filed?	C. 🗌 YES	NO □