BEVERAGE COMMISSION Texans Helping Businesses & Protecting Communities

**TEXAS ALCOHOLIC** 

## LOCATION PACKET FOR RETAILERS

L-L (09/2019)

cha	s Location packet (L-L) should be completed by all retailers submitting an original, reinstatement, and/or Inge of location application.  This packet (L-L) along with the Prequalification Packet (L-ON) or (L-OFF) must be Imitted to your local TABC office.	è
	statutory and rule references mentioned in this application refer to and can be found in the Texas Alcoholic Beverag de or Rules located on our website. <b>www.tabc.texas.gov/laws/code_and_rules.asp</b>	е
1.	Application for:	
	Reinstatement     Reinstatement and Change of Trade Name     License/Permit Number	
	Change of Location Change of Location and Trade Name License/Permit Number	
2.	Trade Name of Location (Name of restaurant, bar, store, etc.)	
3.	Location Address	
4.	Owner of Business-/Applicant (Name of Corporation, LLC, etc.)	
5.	Federal Employer Identification Number (FEIN)	
	INITIAL INFORMATION	
6.	Do you currently hold an active license/permit issued by the TABC under the above FEIN? Yes No If "YES," provide your most recently issued license/permit number. If "NO," you must complete the Business Packet (L-B).	
7.	If you hold a current and active license/permit under the above FEIN has there been a change in the ownership or business structure since the submission of your last application? If "YES," you must complete the Business Packet for Reporting Changes (L-BRC) in its entirety.	
	OWNERSHIP/LEASE/SUBLEASE/MANAGEMENT INFORMATION	
8.	Does the applicant own the land and building at this proposed licensed location? Yes No If "NO," please complete Owner of Property (L-OP). NOTE: Be prepared to provide additional information (such as a copy of your lease) if requested.	
9.	If operating under a lease at this location, complete the following:	
	Expiration date(s)/Options	
	Monthly rental amount \$	
	Other fees and payments to landlord	
10.	Are you operating under any concession, service or management agreement(s) that contain terms for services or management beyond property rental?	
	Expiration date(s)/Options	
	Monthly fee <u>\$</u> If you have a sublessor that differs from the management company enter sublessor name below <b>and complete Form L-SL.</b>	
	Sublessor Name	
11.	Do you or anyone else at the location operate under a franchise agreement?	
	of ALL phases of the purchase, sale, service and brands of alcoholic beverages?	

If "YES," indicate th	nises with another business entity? e tradename(s) of business(es) and s or other business(es):	ales and	🗌 Yes 🗌 No				
Sales & Use Tax	Number						
13. Are there any agreem If "YES," attach a co	ents, excluding questions 9, 10 & 11 opy of agreement.	, which involve alcohol in any wa	ay? 🗌 Yes 🗌 No				
	SALES INFORMATION						
14. Provide projected (f	uture) sales data for first 12 months o	f operation.					
Sales Year	(YYYY) <u>20</u>						
Alcoholic Beverag	ge Sales <u>\$</u>						
Foc	od Sales \$						
Oth							
Tot	al Sales \$						
	LOCATION IN	ORMATION					
15. Is the proposed location	on in a hotel or motel?		🗌 Yes 🗌 No				
If "NO," attach a dia	<ul> <li>16. Will the license/permit embrace the entire location address as shown in question #3?</li> <li>If "NO," attach a diagram of your premise as required by Section 11.49.</li> <li>The location will be inspected prior to approval of your application.</li> </ul>						
	FINANCE INF	ORMATION					
<ul> <li>17. Enter the total amount of investment from all sources for this location.</li> <li>Please be prepared to provide copies of all documents related to the financing of this location.</li> </ul>							
18. List any and all sources of funds advanced to you for your business. If a partnership or corporation, list entity along with partners/officers.							
SSN or FEIN	Issuing State/DL No.	Date of Birth (mm/dd/yyyy)	Amount				
			\$				
Name, Corporation, Partner/Officer		Terms					
SSN or FEIN	Issuing State/DL No.	Date of Birth (mm/dd/yyyy)	Amount \$				
Name, Corporation, Partner/Officer		Terms	· · ·				
SSN or FEIN	Issuing State/DL No.	Date of Birth (mm/dd/yyyy)	Amount \$				
Name, Corporation, Partner/Officer		Terms					

(If more space is needed, attach additional page.)

MEASUREMENT INFORMATION						
line of a private/public school, wi If "YES," written notice of this ap	nce of your establishment to the nearest prive II this location be within 1,000 feet of a prive pplication must be given to the school officient ith this application as required by Section 1	ate/public school?				
<ul> <li>O.Is any property line of your premises within 300 feet of a residential address or established</li> <li>neighborhood association?</li> <li>Yes No</li> <li>If "YES," and if you are applying for an On-Premise License/Permit, and if a Food and Beverage Certificate is not applied for, notify each residential address and established neighborhood association.</li> <li>The notice must be provided not earlier than the 14th day and not later than the 7th day before the date the application is filed.</li> <li>Submit a copy of the completed notice along with a list of all addresses notified; as required by Section 11.393 and 61.38</li> </ul>						
	otice of Application to view and print notic					
ON-PREMISE LICENSES AND PERMITS ONLY MEASUREMENT INFORMATION FOR APPLICANTS IN MUNICIPALITIES WITH A POPULATION OF 1.5 MILLION OR MORE ACCORDING TO THE LAST FEDERAL CENSUS						
21.Will your business be located within 300 feet of residence, church, school, day care or social 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? □ Yes □ No If "YES," will 75% or more of the applicant's actual or anticipated gross revenue from the sale of alcoholic beverages? □ Yes □ No If "YES," to both of the questions; you must notify all tenants or property owners of your intent to apply for an alcohol beverage license/permit within five days of the filing of an						
original application. Has such not	ice been given as required by Section 11.52	2?YesNo				
	BREWPUB (BP) Only					
	ell your alcoholic product directly to other re					
	ell your alcoholic product to wholesalers/dis					
24. Will you, the applicant, be engaged in the business of brewing and packaging malt liquor, ale or beer in quantities sufficient to operate a brewpub not later than 6 months after the date of issuance of the original license?						
WARNING AND SIGNATURE	If Applicant Is/Must Sign Individual/Individual Owner Partnership/Partner Limited Partnership/General Partner	Corporation/Officer Limited Liability Company/ Officer or Manager				
EACH LICENSEE OR PERMITTEE SHALL HAVE EXCLUSIVE OCCUPANCY AND CONTROL OF THE ENTIRE LICENSED LOCATION WITH RESPECT TO THE SALE OF ALCOHOLIC BEVERAGES. ANY ARRANGEMENT THAT SURRENDERS SUCH CONTROL OF THE EMPLOYEES, PREMISES OR BUSINESS, INCLUDING PROFITS AND LOSSES, TO PERSONS OTHER THAN THE LICENSEE OR PERMITTEE IS UNLAWFUL.						
WARNING: Section 101.69 of the Texas Alcoholic Beverage Code states: "a person who makes a false statement or false representation in an application for a permit or license or in a statement, report, or other instrument to be filed with the Commission and required to be sworn commits an offense punishable by imprisonment in the Texas Department of Criminal Justice for not less than 2 nor more than 10 years." BY SIGNING YOU ARE SWEARING TO ALL INFORMATION AND ATTACHMENTS PROVIDED ARE CORRECT.						
PRINT	SIGN					
NAME	HERE					
	TITLE					
Before me, the undersigned authority, on this day of, 20, the person whose name is signed to the foregoing application personally appeared and, duly sworn by me, states under oath that he or she has read the said application and that all the facts therein set forth are true and correct. SIGN HERE						
NOTARY PUBLIC						
SEAL						