



Utah Department of
Alcoholic Beverage Services
1625 South 900 West
Salt Lake City, UT 84104

DABS OFF-PREMISE BEER APPLICATION CHECKLIST

Website: www.abs.utah.gov
Phone 801-977-6800
Fax 801-977-6889

All items in the checklist below (except the business license) must be completed before an application will be accepted by DABS. We will attempt to complete investigations for applications received by the 10th of the month for commission review that same month. However, an investigation may take up to three months to complete. You may also be asked to supply additional documentation as needed for the investigation. Therefore, we encourage you to apply early to allow for adequate time for investigation and processing. Applications can be approved as "conditional" 9 to 12 months prior to opening.

1. _____ Completed Application Form: Signed
2. _____ A **non-refundable** application fee: \$75
3. _____ Licensing fees: \$250
4. _____ Ownership entity / organizational documents filed with Utah Department of Commerce
 - Individual / Sole Proprietor – None Needed
 - If a Corporation, submit a copy of the Articles of Incorporation
 - If a Partnership, submit a copy of the written partnership agreement
 - If a Limited Liability Company, submit a copy of the Articles of Organization
5. _____ Local Consent (form included in the application) from the city or county where the business is located
6. _____ Copy of current local business licenses (all that apply): Business Beer
* (Applications may be considered "conditional" without submitting a business license)
7. _____ Scaled floor plan (8 1/2" x 11") of premises highlighting areas for storage, sale & consumption of alcohol
8. _____ Lease Agreement (signed) or Premises owned by the applicant
9. _____ Manager Training Scheduled on: _____ or attach proof of completion
10. _____ Premises Inspection completed _____ (for DABS compliance use only after application has been submitted)

MAILING ADDRESS

P.O. Box 30408
Salt Lake City, UT 84130-0408
Phone: (801) 977-6800



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OFF-PREMISE BEER RETAIL LICENSE APPLICATION

Licensing and Compliance Division

Application Number _____

Hotel Grocery Store Convenience Store / Gas Station Other Stores Beer Manufacturing

Application Fee (non-refundable) \$75 + Initial License Fee \$250 = Total Fee: \$325

Ownership Information

1. Ownership Entity: _____
Entity Type: Individual Partnership Corporation Limited Liability Company

2. DBA: (Name of Business): _____

3. Contact Person: _____ Phone number: _____ Email: _____

4. Local Manager: _____ Phone number: _____ Email: _____
(IF DIFFERENT)

5. Corporate Contact: _____ Phone number: _____ Email: _____
(IF DIFFERENT)

6. Location Business Address: _____
STREET CITY STATE ZIP

7. Mailing Address: _____
(IF DIFFERENT) STREET CITY STATE ZIP

8. Other alcoholic beverage licenses currently or previously held by applicant/entity/principals: _____

Business / Property Information

9. Date opened for business (projected): _____ Days / hours of operation: _____

10. Federal, state, withholding, and workforce service tax compliance:

By checking this box, I acknowledge that I am legally obligated to comply with the applicable federal and state laws pertaining to the payment of taxes and contributions to unemployment and insurance funds.

11. Owner of real property & building (leaseholder)

Name: _____ Address: _____

Phone: _____ City, State, zip _____

12. Ownership / Management

List all individuals, partners, managers, officers, directors, or members. Percentage owned must = 100%. Also, list employees appointed to manage or direct operations of the business. All individuals listed MUST be at least 21 years or older. If not a U.S. Citizen, provide residency status. Use additional sheets if necessary. For complex corporate structures, please include an organizational chart showing ownership interests of all parent companies until all individual person percentages are disclosed.

Name	Complete home address (include city, state, zip code)	POSITION HELD	Date of Birth Month / Day Year	Percent Owned

13. Are you an industry member; or do you own or have interest in a brewery, winery, or distillery? Yes _____ No _____

If Yes explain: _____

ATTESTATION:

Read and initial each statement below:

_____ Applicant agrees as a condition of licensing that he/she has read and will abide by the provisions of Title 32B, Utah Code, and all rules of the commission and directives of the Department of Alcoholic Beverage Services; Applicant understands that the alcohol license may be suspended or revoked, including forfeiture of the bond, if the applicant fails to adhere to applicable laws and rules, or if the applicant no longer possesses the statutory qualifications for licensure.

_____ The applicant(s) attest(s) that they have not been convicted of any of the offenses listed below and stipulate(s) that if any disqualifying conviction is discovered, the license, permit, or package agency will immediately be surrendered.

1. Within seven years before the day on which the commission issues the package agency, license, or permit, a felony under a federal or state law.
2. Within four years before the day on which the commission issues the package agency, license, or permit, a violation of a federal or state law, or local ordinance concerning the sale, offer for sale, warehousing, manufacture, distribution, transportation, or adulteration of an alcoholic product, or a crime involving moral turpitude
3. On two or more occasions within the five years before the day on which the package agency, license, or permit is issued, driving under the influence of alcohol, drugs, or the combined influence of alcohol and drugs.

_____ Applicant agrees to immediately notify the department of any change in ownership entity and understands that failure to do so may result in immediate suspension of the license

_____ The undersigned verifies that the premises will not be used for permitting gambling, illegal drugs, or any other violation of law or ordinance.

_____ The undersigned hereby authorizes the department's access to federal, state, and local sales, payroll, income, and real and personal property tax information.

_____ The undersigned verifies that the applicant complies with all federal and state laws pertaining to payment of taxes and contributions to unemployment and insurance funds.

_____ The undersigned applicant does not and will not discriminate against persons on the basis of race, color, sex, religion, ancestry, or national origin.

_____ The undersigned hereby voluntarily consents that representatives of the Alcoholic Beverage Services Department, Commission, State Bureau of Investigation (Bureau of Alcoholic Beverage Law Enforcement), and any other law enforcement agencies shall be admitted immediately and permitted without hindrance or delay to inspect the entire premises and all records of the licensee.

_____ The undersigned acknowledges that he/she has read and understands the statements herein and that the execution thereof is one voluntarily and by authorization of the applicant entity; and that **any false statement made on this application or any other related document is a second-degree felony. It may also result in suspension or revocation of the license.**

_____ The undersigned hereby makes application to the Utah Alcoholic Beverage Services Commission and certifies that the information contained herein and attached hereto is true and correct.

_____ Date

_____ Applicant / Owner of the business

_____ Title / Position

_____ Authorized Signature

OFF-PREMISE BEER LICENSE

Local Consent

PURPOSE: Local business licensing authority provides written consent to the Alcoholic Beverage Services Commission to issue an off-premise beer license for a person to purchase, store, sell, or offer for sale beer for consumption off the premises of the applicant.

AUTHORITY: Utah Code 32B-5-201, 203, 205, and 32B-7

_____, City Town County
Local business license authority

hereby grants its consent to the issuance of an off-premise beer license to:

Business Name (DBA): _____

Entity Name (or owner's name if sole proprietor): _____

Location Address: _____

Authorized Signature

Name/Title

Date

This is a suggested format. A locally produced city, town, or county form is also acceptable.
The local consent must be submitted to the DABS by the applicant as part of a complete application.