



Utah Department of  
Alcoholic Beverage Services  
P.O. Box 30408  
Salt Lake City, UT 84130

## OFF-PREMISE CHANGE OF LOCATION APPLICATION CHECKLIST

Website: [www.abc.utah.gov](http://www.abc.utah.gov)  
Phone 801-977-6800  
Fax 801-977-6889

The items below must be complete and submitted no later than the *10th of the month*, or sooner so that your application can be processed in time for DABS Commission review that month. All licensing requirements must be fully satisfied in order to complete your application. \*Final approval for licensing is subject to inspection of premises. INCOMPLETE APPLICATIONS WILL BE RETURNED.

1. \_\_\_\_\_ Completed Application Form:  Signed
2. \_\_\_\_\_ Fees:  
 \$300 **non-refundable** application fee
3. \_\_\_\_\_ *Local Consent* \* form signed by the city where your new business is located  
\*Go to the DABS Website & download the correct Local Consent form for off-premise licenses
4. \_\_\_\_\_ Copy of NEW local business license\*:  
\*Applications may be considered "conditional" without submitting a business license.
5. \_\_\_\_\_ Scaled floor plan (8 1/2" x 11") of premises highlighting all beer displays (two maximum) and beer storage areas.  
\*Revisions to the floor plan must first be submitted and approved by DABS.
6. \_\_\_\_\_  Lease Agreement (signed) *or*  Premises owned by the applicant
7. \_\_\_\_\_ Inspection of premises



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A change of location requires Commission approval. If staying in the same county, the fee is \$300. Please note that different fees and requirements apply if you are moving from the county where you are currently licensed. All applications must be submitted no later than the 10<sup>th</sup> of the month to be considered on that month's agenda. Incomplete applications may be returned. (See Fee Schedule).

### LICENSE & LICENSEE INFORMATION

1. Business name: \_\_\_\_\_ DABS license number: \_\_\_\_\_

2. Current licensed address: \_\_\_\_\_  
STREET NUMBER STREET NAME CITY ZIP

3. Contact person: \_\_\_\_\_ Business Phone: \_\_\_\_\_

Mobile Number: \_\_\_\_\_ Email: \_\_\_\_\_

### BUSINESS / PROPERTY INFORMATION

4. New location address: \_\_\_\_\_  
STREET NUMBER STREET NAME CITY ZIP

5. Mailing address \_\_\_\_\_  
STREET NUMBER STREET NAME CITY ZIP

6. Projected open date: \_\_\_\_\_ Projected Days / hours of operation: \_\_\_\_\_

7. Owner of real property & building (lease holder)

Name: \_\_\_\_\_ Address: \_\_\_\_\_

Phone: \_\_\_\_\_ City,State,Zip \_\_\_\_\_

The undersigned hereby makes application to the Utah Alcoholic Beverage Services Commission for the relocation of a retail alcohol license and certifies that the information contained herein and attached hereto is true and correct and agrees not to sell, offer for sale, furnish, or allow the consumption of an alcoholic product at the proposed location before obtaining Commission approval.

\_\_\_\_\_

Date

\_\_\_\_\_

Applicant/Owner of 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.