



Utah Department of Alcoholic  
Beverage Services  
1625 South 900 West  
Salt Lake City, UT 84130

## Restructuring the Ownership of 51% or more to an Existing Entity CHECKLIST

Mailing Address:  
P.O. Box 30408  
Salt Lake City, UT 84130-0408  
☎: 801-977-6800 📧: abc.utah.gov

A complete application must be submitted no later than the **10th of any month to be considered for that month's commission meeting**. However, applying early is highly recommended to allow for processing and investigation. Any application submitted after the 10<sup>th</sup> of any month will be considered on the following month's commission agenda. Any currently licensed entity which closes for more than 10 days must first get approval from DABS. All ownership percentage changes must be complete and an application submitted to DABC within 60 days of the change event.

1. \_\_\_\_\_ A non-refundable application fee (see fee schedule): \$ \_\_\_\_\_  
(Application fee is \$330 for restaurants – all others are \$300)
  
2. \_\_\_\_\_ Licensing fees (see fee schedule): \$ \_\_\_\_\_  
(The change of ownership fee is the same as the renewal fee for the type of retail license being transferred)
  
3. \_\_\_\_\_ Completed Application Form, and:
  - New local consent (in the application packet)  
Some cities will require new licensing, and some won't. Therefore, you must submit the proper new local consent so the city or county jurisdiction may tell us if they require a new business license.
  - New business license (only if required by the local authority)
  - Purchase agreement and/or other documents satisfying the entity's legitimate change of ownership or restructuring, such as a will, probate documents, bankruptcy, etc.
  - Organizational chart for complex corporate structures
  - Ownership entity / organizational documents *updated* with the Utah Department of Commerce
    - If a corporation, submit an updated copy of the Articles of Incorporation
    - If a partnership, submit an updated copy of the written partnership agreement
    - If a limited liability company, submit an updated copy of the Articles of Organization
  
4. \_\_\_\_\_ a. I attest the following are current and have not changed:  Bond  Insurance  RASP  Floorplan, or  
 b. These NEW documents are being submitted with the application  Bond  Insurance  RASP  Floorplan  
 c. If a new floorplan is submitted, a new inspection must be conducted. \_\_\_\_\_
  
5. \_\_\_\_\_ Criminal history background documents must be completed for all **newly added individuals** to the organization:
  - Electronic Fingerprints or Fingerprint card(s). (Electronic fingerprinting (Live Scan) is available at DABS by appointment, at BCI, or at another FBI electronic fingerprint provider location. (See instructions).
  - Signed 'Informed Consent and Waiver' forms for each new owner or manager
  - FBI Background fees: \$33.25 for each new owner and /or persons employed to act in a supervisory/managerial capacity. (See background instructions)
  
6. \_\_\_\_\_  Provide a new exemption certificate TC-721
  
7. \_\_\_\_\_ \*Manager Training - New Owners / Managers signed up for manager training on: \_\_\_\_\_  
 Note: Newly added owners and managers have 30 days to complete the training and backgrounds.  
  
 or  Training Completed for: \_\_\_\_\_



7. Remember, it is important that bonds, insurance, RASP plans, and any other documents currently on file for the entity remain in place. **If any of those documents will be changing, they must be included in this application.** New local consent is always required, and a new business license may be required depending on the local jurisdiction. You must check with the local jurisdiction. If they require a new business license, DABS requires a copy of the new business license.

Please provide the following verification that the following documents are still current.

- Bond
- Current ACORD insurance certificate
- RASP (See Instructions for writing a new "Responsible Alcohol Service Plan" if needed)
- Floorplan (floorplan changes will require a new inspection)

**NEW OWNERSHIP / MANAGEMENT BACKGROUNDS**

List all individuals, partners, managers, officers, directors, or members. Percentage owned must = 100%. All individuals listed MUST be at least 21 years or older. For complex corporate structures, please attach an organizational chart showing ownership interests of all parent companies until all individual person percentages are disclosed. Each parent entity must be reduced to individuals within the organization. Each individual within all entities must include their title and % owned. **Also, list employees appointed to manage or direct operations of the business.** Anyone owning at least 20% of an entity and all employees/managers must submit fingerprints for a background check. If not a U.S. Citizen, provide residency status in section 7. Use additional sheets as necessary.

Name	Complete home address (include city, state, zip code)	Position Held	Date of Birth Month / Day Year	% Owned	US Citizen Y/N

8. Residency status (List and attach proof of residency status for all individuals who are not US citizens): \_\_\_\_\_  
 \_\_\_\_\_

9. Criminal Offenses: List all criminal offenses other than minor traffic offenses of which you or any person listed have been convicted or pending criminal charges (name, criminal offense, date of conviction – use additional sheets if necessary): \_\_\_\_\_  
 \_\_\_\_\_

10. New owner/managers and employee managers must complete manager training within 30 days after being added to the entity. A "manager" includes owners, assistant managers, supervisors, team leads, etc. if they (a) manage operations or (b) supervise the furnishing of an alcoholic product at a premises that is licensed under 32B Alcoholic Beverages Services Act. Visit our website to sign up online.

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

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\_\_\_\_\_ 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

## DO YOU HAVE A VIOLATION HISTORY

### 32B-5-203 Commission and department duties before issuing a retail license.

*... Before issuing a retail license, the commission shall consider operational factors such as considering the person's ability to manage and operate a retail license and consider any other factor the commission considers necessary.*

The commission and department are required, before issuing a retail license, to conduct an investigation as to whether a retail license should be issued. The commission has determined that one of those factors that will affect their decision to grant a license is whether or not an applicant has had a violation history. Commission policy states:

- Any applicant who has had a violation history will NOT be considered for a new license for THREE MONTHS after the final commission order for any serious or grave violations.
- All applicants with a violation of serious or grave in the last four months to a year will be required to appear before the commission to address whether a new license should be granted.
- The commission will consider the number of violations and all mitigating and aggravating factors in determining when, if at all, to grant a license.
- For the purpose of this policy, violation history applies to all licenses where there is common ownership of 20% or more.
- DABS staff has been instructed to inform applicants with a pending violation or a violation history in the last three months to apply *after* the prescribed periods.

### Please check with DABS to determine if or when a violation was adjudicated

Any Violations  No  Yes

*If Yes, fill in the information below:*

Violation \_\_\_\_\_  Serious  Grave Date Adjudicated \_\_\_\_\_

Violation \_\_\_\_\_  Serious  Grave Date Adjudicated \_\_\_\_\_

Violation \_\_\_\_\_  Serious  Grave Date Adjudicated \_\_\_\_\_

Violation \_\_\_\_\_  Serious  Grave Date Adjudicated \_\_\_\_\_

Date the application may be considered by the Commission \_\_\_\_\_

**LOCAL CONSENT**  
**Restructuring of the Ownership of 51% or more of an Existing Entity**

DABS does not change its license number assigned to a particular licensee when the existing entity is not changing.

The DABS License Number of the existing entity is: \_\_\_\_\_

PURPOSE: Local business licensing authority provides written consent to the Alcoholic Beverage Services Commission to continue an existing on-premise alcohol license for a previously licensed entity to store, sell, offer for sale, furnish, or allow the consumption of an alcoholic product on the premises of the applicant.

AUTHORITY: Utah Code 32B-18-202

\_\_\_\_\_,  City  Town  County  
Local business license authority

hereby grants its consent to the 51% or more change of ownership of an existing DABS licensed entity to:

Business Name (DBA): \_\_\_\_\_

Business Entity: \_\_\_\_\_

Location Address: \_\_\_\_\_

This type of restructuring of the entity does not change the licensed entity holding the DABS license or the DABS license #. However, an ownership change of the entity of 51% or more requires DABS Commission approval and verification of any local licensing changes if required by the local authority.

1. If a new business license is required by the local authority - Check Here:  or  
(A copy of the new license must then be provided to DABS by the applicant)

2. A new business license is NOT required from the city:

\_\_\_\_\_  
Authorized Local Authority Signature

\_\_\_\_\_  
Print Name / Title

\_\_\_\_\_  
Date

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

# **Criminal History Background Check Procedures**

## **DABS Licensees / Applicant / Owner / Manager**

**AUTHORITY:** Utah Code 32B-1 Part 3

Criminal history background checks are required for all owners and persons employed to act in a supervisory or managerial capacity for a package agency, licensee, or permittee.

*If the owner is a partnership, corporation, or limited liability company*, a criminal history background check is required for all partners, managing agents, managers, officers, directors, or any stockholder who holds at least 20% of the total issued and outstanding stock of the corporation, or a member who owns at least 20% of the limited liability company.

Each individual who falls under the description above shall consent to a criminal history background check and shall deliver the following documents and fees to the Department of Alcoholic Beverage Services.

**New DABS license applicants must submit fingerprints either prior to submitting their application or with their application, so please plan ahead for fingerprinting services so you can meet your deadline before the 10th of the month.**

**Background checks for each applicable person must include:**

- Fingerprints - either through a live scan service or a completed FBI fingerprint card
- A signed *Informed Consent & Waiver* form for each individual fingerprinted
- \$33.25 submitted to DABS for each individual fingerprinted

**Live scan fingerprinting:** Contact any live scan provider to see if they serve the general public. **Note:** if you use a live scan provider other than DABS, you must supply them with the attached **live scan authorization form**. They may or may not charge a fee for fingerprint services, but the \$33.25 background fee must be paid to DABS regardless of another provider's service fees.

**Live scan fingerprint providers (there may be others you can use):**

1. **DABS - by appointment only**
  - please call (801) 977-6800 to schedule an appointment
  - No charge for the fingerprint service, but you must pay the \$33.25 background check fee.
  - Address: 1625 S. 900 W., Salt Lake City, Utah 84104
2. **The Bureau of Criminal Identification (BCI)**
  - Address: 3888 W. 5400 S., Taylorsville, Utah 84129
  - Phone: (801) 965-4445
3. **Yup Fingerprinting-**
  - Multiple locations (Salt Lake City, Lehi, Logan, and St. George)
  - See their website for specific contact information: <https://www.yupfingerprinting.com/>

## DABS LICENSEE & MANAGER BACKGROUND CHECK INFORMED CONSENT AND WAIVER

\_\_\_\_\_  
Print - Name of Applicant (First, Middle, Last)

\_\_\_\_\_  
Date of Birth (Month, Day, Year)

\_\_\_\_\_  
Name of Employer

\_\_\_\_\_  
Employer Address

\_\_\_\_\_  
Job Title

\_\_\_\_\_  
Phone Number of the Applicant

(The above information to be verified by valid identification document(s) prior to background check request per Section 1028 of Title 18, United States Code)

### APPLICANT NOTIFICATION AND PURPOSE:

In accordance with Utah Code 32B-1-303-307, your fingerprints will be used to **continuously check** the criminal history records of local and national (FBI) background check databases to determine whether an applicable individual has been:

- Convicted of a felony under federal or state law;
- Convicted of a violation of federal law, state law, or local ordinance concerning the sale, manufacture, distribution, warehousing, or transportation of an alcoholic beverage;
- Convicted of a crime involving moral turpitude;
- Convicted on two or more occasions within the previous five years, driving under the influence of alcohol, a drug, or the combined influence of alcohol and a drug.

### RECORD CHALLENGE:

If it is determined that a criminal history record contains a disqualifying offense, the applicable person must be notified of the reason for disqualification and given an opportunity to respond to the disqualification. You have the opportunity to complete or challenge the accuracy of the information contained in the FBI identification record. The procedure for obtaining a change, correction, or updating an FBI identification records are set forth in Title 28, CFR, 16.34. Procedures for challenging the State of Utah records if Utah has records that the FBI does not (UCA 53-10-108) can be found on the BCI website at <https://bci.utah.gov/wp-content/uploads/sites/15/2018/01/Challenge-Application-12-5-2017.pdf>

### WAIVER: (initial each attestation below)

\_\_\_\_\_ I hereby authorize the Department of Alcoholic Beverage Services (DABS) to investigate my criminal history records and acknowledge that a background check will be conducted and maintained by the State Bureau of Criminal Identification and my fingerprints continuously checked against local and national (FBI) background check databases for so long as I maintain an employment or regulatory relationship with the DABS.

\_\_\_\_\_ My personal information and fingerprints may be retained for ongoing monitoring and comparison against future submissions to the state, regional or federal database and latent fingerprint inquiries. DABS will establish procedures to ensure removal of my fingerprints from applicable state and federal databases when I am no longer under their purview. I will provide a list of all criminal convictions which contains a description of the crimes and the particulars of the convictions.

\_\_\_\_\_ I have read the attached Privacy Statement and understand my rights according to this statement.

\_\_\_\_\_ I agree by signing below to notify the DABS if I cease this relationship and wish my fingerprints to be removed from the notification system.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

# FBI Privacy Act Statement

**Authority:** The FBI's acquisition, preservation, and exchange of fingerprints and associated information is generally authorized under 28 U.S.C. 534. Depending on the nature of your application, supplemental authorities include Federal statutes, State statutes pursuant to Pub. L. 92-544, Presidential Executive Orders, and federal. Providing your fingerprints and associated information is voluntary; however, failure to do so may affect the completion or approval of your application.

**Social Security Account Number (SSAN).** Your SSAN is needed to keep records accurate because other people may have the same name and birth date. Pursuant to the Federal Privacy Act of 1974 (5 USC 552a), the requesting agency is responsible for informing you whether disclosure is mandatory or voluntary, by what statutory or other authority your SSAN is solicited, and what uses will be made of it. Executive Order 9397 also asks Federal agencies to use this number to help identify individuals in agency records.

**Principal Purpose:** Certain determinations, such as employment, licensing, and security clearances, may be predicated on fingerprint-based background checks. Your fingerprints and associated information/biometrics may be provided to the employing, investigating, or otherwise responsible agency, and/or the FBI for the purpose of comparing your fingerprints to other fingerprints in the FBI's Next Generation Identification (NGI) system or its successor systems (including civil, criminal, and latent fingerprint repositories) or other available records of the employing, investigating, or otherwise responsible agency. The FBI may retain your fingerprints and associated information/biometrics in NGI after the completion of this application and, while retained, your fingerprints may continue to be compared against other fingerprints submitted to or retained by NGI.

**Routine Uses:** During the processing of this application and for as long thereafter as your fingerprints and associated information/biometrics are retained in NGI, your information may be disclosed pursuant to your consent and may be disclosed without your consent as permitted by the Privacy Act of 1974 and all applicable Routine Uses as may be published at any time in the Federal Register, including the routine uses for the NGI system and the FBI's blanket routine uses. Routine uses include, but are not limited to, disclosures to: employing, governmental or authorized non-governmental agencies responsible for employment, contracting licensing, security clearances, and other suitability determinations; local, state, tribal, or federal law enforcement agencies; criminal justice agencies; and agencies responsible for national security or public safety.

**Additional Information:** The requesting agency and/or the agency conducting the application-investigation will provide you additional information pertinent to the specific circumstances of this application, which may include identification of other authorities, purposes, uses, and consequences of not providing requested information. In addition, any such agency in the Federal Executive Branch has also published notice in the Federal Register describing any system(s) of records in which that agency may also maintain your records, including the authorities, purposes, and routine uses for the system(s).

# Utah Department of Alcohol Beverage Services

## LIVE SCAN AUTHORIZATION FORM

### Billable to DABS

Agency Billing Code: B1664 (DABS – WIN/FBI)  
Type of Background Check Required: WIN/FBI Check: NFUF

Use this form if NOT doing fingerprinting services at DABS. Any qualified 'Live Scan' provider that can provide the services may do so using the DABS billing code. They may or may not charge a fee for their services. Call Ahead!

Date: \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Applicant DOB: \_\_\_\_\_ Applicant SSN: \_\_\_\_\_

DABS Authorization Signature: \_\_\_\_\_ Angela Micklos

### NOTE: THIS FORM STAYS WITH THE 'LIVE SCAN' PROVIDER

Regardless of any additional fees paid to the 'Live Scan' provider for their fingerprinting services, in accordance with Utah Code 32B-1-303-307, **fees of \$33.25 must be submitted to DABS** for all owners and persons employed to act in a supervisory or managerial capacity for a package agency, licensee or permittee. If the owner is a partnership, corporation, or limited liability company, a criminal history background check is required for all partners, managing agents, managers, officers, directors, or any stockholder who holds at least 20% of the total issued and outstanding stock of the corporation, or a member who owns at least 20% of the limited liability company

## How to Write Your

# RESPONSIBLE ALCOHOL SERVICE PLAN – (RASP)

A “Responsible Alcohol Service Plan” (RASP) must be submitted as a requirement of DABS licensing and renewal.

## What is a RASP?

A Rasp is a written set of policies and procedures that outlines measures to prevent employees from:

- a. Over-serving alcoholic beverages to customers.
- b. Serving alcoholic beverages to customers who are actually, apparently, or obviously intoxicated, and
- c. Serving alcoholic beverages to minors.

Every business is different, such as more or fewer employees, size of the business, amount of alcohol sales, restaurants versus bars or bowling centers, etc. So each RASP should reflect the best possible way for your business to succeed in “Responsible Alcohol Service”. Take each point separately and decide:

1. How will our business prevent overservice of alcohol?”
  2. How will we prevent not serving someone who is already intoxicated?
  3. How will we prevent our servers from ever serving anyone under the age of 21?
- Put some time and thought into your RASP.
  - Make certain that your employees are aware of your particular RASP procedures, be trained on them, and follow them.
  - A copy of your RASP will be kept on file with DABS.
  - You can write a new RASP plan as circumstances change or new information is added.
  - These plans will be required annually, and compliance officers will check to make sure they are being implemented at your business.
  - Send any new plans to DABS as well as re-train your employees.



Ex mption C rtificat
(Sales, Use, Tourism and Motor Vehicle Rental Tax)

TC-721
Re 20

Form with fields for Name of business or institution claiming exemption, Telephone number, Street address, City, State, IP Code, Authorized signature, Name (please print), Title, Name of Seller or Supplier, Date, Sales Tax License Number, and Required for all Exemptions marked with an asterisk (\*)

The signer of this certificate MUST check the boxes showing the basis for which the exemption is being claimed. 9

DO NOT SEND THIS CERTIFICATE TO THE TAX COMMISSION
Keep it with your records in case of an audit.

For purchases by government, Native American tribes and public schools, use form TC-721G.

\* [X] Resale or Re-lease

I certify I am a dealer in tangible personal property or services that are for resale or re-lease. If I use or consume any tangible personal property or services I purchase tax free for resale, or if my sales are of food, beverages, dairy products and similar confections 9 dispensed from vending machines (see Rule R86 -1 S-74), I will report and pay sales tax directly to the Tax Commission on my next sales and use tax return.

\* [ ] Religious or Charitable Institution

I certify the tangible personal property or services purchased will be used or consumed for essential religious or charitable purposes. This exemption can only be used on purchases totaling \$1,000 or more, unless the sale is pursuant to a contract between the seller and purchaser.

[ ] Construction Materials Purchased for Religious and Charitable Organizations

I certify the construction materials are purchased on behalf of a religious or charitable organization and that they will be installed or converted into real property owned by the religious or charitable organization. Name of religious or charitable organization: \_\_\_\_\_

Name of project: \_\_\_\_\_

\* [ ] Fuels, Gas, Electricity

I certify all natural gas, electricity, coal, coke, and other fuel purchased will be predominantly used for industrial use.

\* [ ] Machinery and Equipment and Normal Operating Repair or Replacement Parts Used in a Manufacturing Facility, Mining Activity, Web Search Portal or Medical Laboratory 9

I certify the machinery and equipment, normal operating repair or replacement parts, or materials (except office equipment or office supplies) are for use in a Utah manufacturing facility described in SIC Codes 2000-3 or a NAICS code within NAICS Sector 31-33; 9 in a qualifying scrap recycling operation; in a co-generation facility 9 placed in service on or after May 1, 2006; in the operation of a Web search portal by a new or expanding business described in NAICS 9 Code 18112; in a medical laboratory described in NAICS Code 9 621 11; or in a business described in NAICS 212, Mining (except Oil and Gas), or NAICS 213113, Support Activities for Coal Mining, 9 NAICS 213114, Support Activities for Metal Mining, or NAICS 21311 9, Support Activities for Nonmetallic Minerals (except Fuels) Mining. For a definition of exempt mining equipment, see Utah Code 9 § -12-104(14) 9

\* [ ] Machinery and Equipment and Normal Operating Repair or Replacement Parts Used in an Electronic Payment Service

I certify the machinery and equipment and normal operating repair or replacement parts have an economic life of three years or more and are for use in the operation of an electronic payment service described in NAICS Code 22320.

\* [ ] Machinery or Equipment Used by Payers of Admissions or User Fees

I certify that: (1) the machinery or equipment has an economic life of three or more years and will be used by payers of admissions or user fees (Utah Code § -12-103(1)(f)); (2) the buyer is in the amusement, gambling or recreation industry (NAICS Subsector 713); and (3) at least 1 percent of the buyer's sales revenue for the previous calendar quarter came from admissions or user fees.

\* [ ] Refinery Machinery, Equipment and Normal Repair or Replacement Parts

I certify the machinery, equipment, normal operating repair parts, catalysts, chemicals, reagents, solutions or supplies are for the use of a refiner who owns, leases, controls or supervises a refinery (see Utah Code §63M-4-701) located in Utah, and beginning on July 1, 2021, annually obtains a valid refiner tax exemption certification from the Office of Energy Development.

\* [ ] Pollution Control Facility

I certify our company has been granted a "Certification of Pollution Control Facilities" as provided for by Utah Code §§1 -12-101 -1 -12-30 by either the Air Quality Board or the Water Quality Board. I further certify each item of tangible personal property purchased under this exemption is qualifying.

\* [ ] Municipal Energy

I certify the natural gas or electricity purchased: is for resale; is prohibited from taxation by federal law, the U.S. Constitution, or the Utah Constitution; is for use in compounding or producing taxable energy; is subject to tax under the Motor and Special Fuel Tax Act; is used for a purpose other than as a fuel; is used by an entity exempted by municipal ordinance; or is for use outside a municipality imposing a municipal energy sales and use tax. The normal sales tax exemptions under Utah Code § -12-104 do not apply to the Municipal Energy Sales and Use Tax.

\* [ ] Short-term Lodging Consumables

I certify the tangible personal property is consumable items purchased by a lodging provider as described in Utah Code § -12-103(1)(i).

## REQUIRED MANAGER TRAINING CLASSES

EVERY MANAGER working in a DABS on-premise licensed business or at an off-premise (OP) beer retailer, must complete a manager training class.

An on-premise "retail manager" means an individual who:

- Manages operations, or
- Supervises the furnishing of an alcoholic product at a premises that is licensed under 32B Alcoholic Beverage Control Act

An on-premise manager includes owners, assistant managers, supervisors, team leads, etc. if they meet the definition above. These managers shall complete their training within:

- 30 days post-hire, or
- The date the licensee obtains the retail license

All off-premise beer managers shall complete their training within:

- 30 days post-hire, or
- 30 days after licensee obtains their OP license

Conditional applicants may not receive or begin operations until they have the managers trained. Training classes will be conducted by the DABS in person or classes can be taken online. The cost is \$25 per manager. Visit our website for training days and times at: <https://abs.utah.gov/licenses-permits/training/>

**NOTE! . . . ANY NEW MANAGER** being added to your license must complete the manager training program. If they are an on-premise retail license manager, they also must have their background check completed within 30 days of hire as a manager.



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
Month/Date/Year

<b>PRODUCER</b>  Insurance Agent/Broker Name Insurance Agent/Broker Street Address or P.O. Box Insurance Agent/Broker City, State & Zip Code Contact & Phone Number	<b>THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.</b>	
	<b>INSURERS AFFORDING COVERAGE</b>	<b>NAIC #</b>
<b>INSURED</b>  Your Business entity (LLC, Corp, Partnership or individual) Your DBA - business name Address City, State Zip	INSURER A: Name of Insurance Company	Enter NAIC#
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	

### COVERAGES

THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	ADD'L INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A	<input checked="" type="checkbox"/>	<b>GENERAL LIABILITY</b> <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> <input type="checkbox"/> GEN'L AGGREGATE LIMIT APPLIES PER <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC	Enter Policy #	Enter Effective Date	Enter Expiration Date	EACH OCCURENCE	\$1,000,000
						DAMAGE TO RENTED PREMISES (Ea occurrence)	\$100,000
						MED EXP (Any one person)	\$N/A
						PERSONAL & ADV INJURY	\$1,000,000
						GENERAL AGGREGATE	\$2,000,000
						PRODUCTS - COMP/OP AGG	\$1,000,000
							\$
	<input type="checkbox"/>	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS <input type="checkbox"/> _____ <input type="checkbox"/> _____				COMBINED SINGLE LIMIT (Each Occurrence)	\$
						BODILY INJURY (Per person)	\$
						BODILY INJURY (Per accident)	\$
						PROPERTY DAMAGE (Per accident)	\$
	<input type="checkbox"/>	<b>GARAGE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> _____				AUTO ONLY - EA ACCIDENT	\$
						OTHER THAN EA ACC	\$
						AUTO ONLY: AGG	\$
	<input type="checkbox"/>	<b>EXCESS/UMBRELLA LIABILITY</b> <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$ _____				EACH OCCURRENCE	\$
						AGGREGATE	\$
							\$
							\$
	<input type="checkbox"/>	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER	
						E.L. EACH ACCIDENT	
						E.L. DISEASE - EA EMPLOYEE	
						E.L. DISEASE - POLICY LIMIT	
	<input checked="" type="checkbox"/>	<b>Liquor Liability</b>	Enter Policy #	Enter Effective Date	Enter Expiration Date	EACH OCCURRENCE	\$1,000,000
						AGGREGATE	\$2,000,000

**DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS**

Business located at:

<b>CERTIFICATE HOLDER</b>  Department of Alcoholic Beverage Services 1625 S 900 W Salt Lake City, UT 84104  Facsimile Number: (801) 977-6889	<b>CANCELLATION</b>  SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE INSURER AFFORDING COVERAGE WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.  AUTHORIZED REPRESENTATIVE
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LICENSE / PERMIT TYPE	APPLICATION FEE	INITIAL FEE	RENEWAL FEE
<b>RETAIL LICENSES</b>			
non-refundable fee			
Airport Lounge	\$300	\$8,000	\$6,000
Arena - (includes at least three sublicenses)	\$500	\$5,000 + \$1,000 for each additional sublicense - (later sublicense additions are \$300 non-refundable fee + \$2,250 each)	\$1,000 + \$1,000 For each sublicense
Banquet Catering	\$300	\$750	\$750
Bar Establishment	\$300	\$2,750	\$2,000
Hospitality Amenity	\$330	\$2,000	\$1,000
Hotel - (includes at least three sublicenses)	\$500	\$5,000 + \$2,000 for each additional sublicense - (later sublicense additions are \$300 non-refundable fee + \$2,250 each)	\$1,000 For each sublicense
Off Premise Beer Retailer	\$75	\$250	\$175
On-Premise Beer - Recreational Amenity	\$300	\$300	\$350
Package Agency	\$125	N/A	N/A
Reception Center	\$300	\$750	\$750
Resort - (includes four sublicenses)	\$300	\$10,000 + \$2,000 for each additional sublicense - (later sublicense additions are \$300 non-refundable fee + \$2,250 each)	\$1,000 For each sublicense
Restaurant – Beer Only	\$330	\$825	\$605
Restaurant – Full Service	\$330	\$2,200	\$1,650
Restaurant – Limited Service	\$330	\$1,275	\$750
Restaurant - Master Limited Service	\$330	\$5,000 + \$1,275 licensing fees for each sublicense not already licensed	\$500 + \$750 renewal fees for each sublicense
Restaurant - Master Full Service	\$330	\$10,000 + \$2,200 licensing fees for each sublicense not already licensed	\$1,000 + \$1,650 renewal fees for each sublicense
Tavern	\$300	\$1,500	\$1,250
<b>NON RETAIL LICENSES</b>			
non-refundable fee			
Beer Wholesaler			\$1,200
<ul style="list-style-type: none"> <li>• Under 500,000 case sales</li> <li>• 500,000 but less than 1 million case sales</li> <li>• Case sales 1 million or more</li> </ul>	\$300	\$2,300	\$2,350 \$3,500
Certificate of Approval (brewers outside of Utah)	\$75	\$300	\$250
Industrial/Manufacturing Special Use	\$75	\$250	N/A
Label Approvals	N/A	\$30 per Label	N/A
Liquor Transport License	\$300	\$2,300	\$1,200
Liquor Warehouse	\$300	\$850	\$1,200
Local Industry Representative	\$75	\$125	\$125
Manufacturer			\$2,900
✓ Except winery production < 20,000 gallons	\$300	\$3,800	\$1,400

LICENSE / PERMIT TYPE	APPLICATION FEE	INITIAL FEE	RENEWAL FEE
<b>PERMITS</b>			
non-refundable fee			
Public Service Special Use Permit	\$75	\$250	\$30 Per flight / ride etc.
Religious Special Use Permit	N/A	\$125	N/A
Scientific/Educational Special Use Permit	N/A	\$125	N/A
Single Event Permit	N/A	\$125	N/A
Temporary Beer Event Permit	N/A	\$100	N/A
MOVING - Transferring your own license to a new location	\$300	No Other Fees	N/A
<b>CHANGE OF OWNERSHIP</b>			
non-refundable fee			
BUSINESS ENTITY STAYING THE SAME - Restructuring 51% or more of the ownership within the same entity.	Same as the license type being applied for	Same as the renewal fee for the license type being transferred	Same as the license type being applied for
FULL TRANSFER - Transferring a license to another person or entity whether staying in the same location or moving the license to a new location	Same as the license type being applied for	Same as the initial license fee for the type of license that is being transferred	Same as the license type being applied for
Off-Premise Beer Retailer	\$75	\$250	\$175