

# APPLICATION FOR RETAIL ALCOHOL PERMIT



City of Denham Springs  
 Attn: Business License Office  
 P O Box 1629  
 Denham Springs, LA 70726

Permit to be issued for the  
 Calendar Year Ending  
 December 31, \_\_\_\_\_

Permit to be  
 Issued to: \_\_\_\_\_  
 (Owner-Name of Individual, Name of Partners or Corporation)

Trade Name (If Any) \_\_\_\_\_

Mailing Address \_\_\_\_\_

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

1. Application is for an Alcohol Permit as a

- Class "A-R" Retail Alcohol Restaurant Outlet (1/2% or more alcoholic beverages by volume) (High-\$500 or Low-\$75)**  
**City Ordinance Sec. 10-94. Requirements for issuance of "A-R" Permits.**

A restaurant establishment shall be defined as an establishment:

- a. Which operates a place of business whose purpose and primary function is to take orders for and serve food items;
- b. Which serves alcoholic beverages in conjunction with meals;
- c. Which serves food on all days of operation;
- d. Which grosses sixty percent of its average monthly revenue from the sale of food, food items, and non-alcoholic beverages;
  - \$ \_\_\_\_\_ Sales from Alcoholic Beverages
  - \$ \_\_\_\_\_ Sales from food, food items and non-Alcoholic Beverages
  - \$ \_\_\_\_\_ Total Sales of all foods and drinks
- e. Which maintains separate sales figures for alcoholic beverages; and
- f. Which operates a fully equipped kitchen, which includes, but is not limited to a range, an oven and refrigerated storage appliances used for the preparation of uncooked foods for service and consumption of such foods on the premises.

- Class "A-G" General Bar (6% or less alcoholic beverages by volume) (Low-\$75)**

- Class "B" Retail Package Outlet (1/2% or more alcoholic beverages by volume) (High-\$500 or Low-\$60)**

2. Kind of ownership, i.e. Individual, Partnership, or a Corporation? \_\_\_\_\_

3. Does Applicant hold Local Alcohol Permit for current year at **any other location**? \_\_\_\_\_ What Kind? \_\_\_\_\_

4. Has the Applicant ever been denied a **State** or **Local** Alcohol Permit? \_\_\_\_\_

5. Has Applicant applied for, or holds any other Alcohol Permit? \_\_\_\_\_ What Kind? \_\_\_\_\_

6. a. Is Applicant the owner of the premises to be occupied? \_\_\_\_\_ Yes \_\_\_\_\_ No

b. If no, does Applicant hold a bona fide written lease? \_\_\_\_\_ Yes \_\_\_\_\_ No

c. If premises leased, give name and address of lessor: \_\_\_\_\_

d. Describe part of building to be occupied by business: \_\_\_\_\_

7. Date started, or to start at this address: \_\_\_\_\_

8. Is the business wholly or partly conducted by one or more managers, agents or other representative(s): \_\_\_\_\_

If answer is yes, list names below and furnish Schedule "A" on each.

9. If partnership or corporation, list below names, address, and percentage of business owned by each partner or stockholder. Schedule "A" must be attached for each partner, or, for each stockholder owning more than 5% of the stock. Also, any Financial backers of the business must be listed and Schedule "A" submitted.

Name of Person <i>Partner, Stockholder or Financial Backer</i>	Kind of Interest	% Owned	Fee
			<b>Penalty</b>
			<b>Total</b>

- 10. Does Applicant owe any excise tax (sales, occupational license, income, franchise, etc) to the state or any parish or municipality? \_\_\_\_\_
- 11. Is this application by a new owner to take over a going business that has been selling liquor regularly and continuously to the present time? \_\_\_\_\_

\_\_\_\_\_ Show (1) name of immediate prior owner, (2) trade name, and (3) permit number.

**To Be Answered by Owner, Partner, Manager, Agent, or Official Signing This Application.**

**Schedule A**

- a. Name: \_\_\_\_\_ Drivers License #: \_\_\_\_\_
- b. Sex: \_\_\_\_\_ Race: \_\_\_\_\_ Social Security #: \_\_\_\_\_
- c. Residence Address: \_\_\_\_\_
- d. Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_
- e. Are you a citizen of the United States? \_\_\_\_\_ The State of Louisiana? \_\_\_\_\_ Over 18 years of Age? \_\_\_\_\_
- f. How did you become a citizen? \_\_\_\_\_
- g. Have you resided in the State of Louisiana continuously for a period of not less than two (2) years next preceding the date of filing this application? \_\_\_\_\_
- h. Have you ever been convicted of a felony under the laws of the United States, the State of Louisiana or any other state? \_\_\_\_\_  
If yes, a proof of pardon and restoration of citizenship must be submitted with this application.
- i. Have you ever been convicted in this state or in any other state or by the United States of soliciting for prostitution, pandering, letting premises for prostitution, contributing to the delinquency of juveniles, keeping a disorderly place, letting a disorderly place, or dealing in narcotics? \_\_\_\_\_
- j. Have you had a license or permit to sell or deal in alcoholic beverages issued by the United States or any other state revoked within five (5) years prior to this application? \_\_\_\_\_
- k. Have you been convicted or had judgment against you involving alcoholic beverages by the state or any other state or the United States within five (5) years prior to the date of this application? \_\_\_\_\_
- l. Have you ever been convicted for violating any of the provisions of the Beer or Liquor Laws of this State? \_\_\_\_\_
- m. Are you married? \_\_\_\_\_ If yes, is spouse eligible for permit? \_\_\_\_\_
- n. Do you or your spouse hold interest in any establishment holding an Alcohol Permit other than the type applied for herein? \_\_\_\_\_

If yes, list the following:

Permit #	Trade Name	Address	Kind of Interest	% Equity
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- o. Have you ever used any other name other than the one given herein? \_\_\_\_\_ If yes, give details below:

Name Used	Place Used	Date
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**AFFIDAVIT**

This affidavit must be signed by owner if individual ownership, authorized partner if a partnership, or authorized official if corporate ownership. It is understood that any misstatement or suppression of fact in an application or Schedule "A" affidavit is a ground for denial or a permit. I swear (or affirm) that I have read each of the questions in this application and that the answers, which I have given, are true and correct to the best of my knowledge, that I meet the qualifications and conditions set out in LA. R. S. 26:279.

Subscribed and sworn to before this \_\_\_\_\_  
Day of \_\_\_\_\_, \_\_\_\_\_

Signed: \_\_\_\_\_  
Title: \_\_\_\_\_

\_\_\_\_\_  
Notary Public or Revenue Deputy

Phone #: \_\_\_\_\_

Failure to file application before beginning business, or, for renewal permit later than December 10<sup>th</sup> of each year will incur penalties, to include 25% of permit fee.

# Schedule A

## To Be Answered by Owner, Partner, Manager, Agent, or Official Signing This Application

- a. Name: \_\_\_\_\_ Drivers License #: \_\_\_\_\_
- b. Sex: \_\_\_\_\_ Race: \_\_\_\_\_ Social Security #: \_\_\_\_\_
- c. Residence Address: \_\_\_\_\_
- d. Date of Birth: \_\_\_\_\_ Place of Birth: \_\_\_\_\_
- e. Are you a citizen of the United States? \_\_\_\_\_ The State of Louisiana? \_\_\_\_\_ Over 18 years of Age? \_\_\_\_\_
- f. How did you become a citizen? \_\_\_\_\_
- g. Have you resided in the State of Louisiana continuously for a period of not less than two (2) years next preceding the date of filing this application? \_\_\_\_\_
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Subscribed and sworn to before this \_\_\_\_\_  
Day of \_\_\_\_\_, \_\_\_\_\_

Signed: \_\_\_\_\_

Title: \_\_\_\_\_

\_\_\_\_\_  
Notary Public or Revenue Deputy

Phone #: \_\_\_\_\_