

# Bloomfield Township Liquor License Application Form

**Check One:** Class C\_\_\_ SDD\_\_\_ SDM\_\_\_ Special\_\_\_ Tavern\_\_\_ Transfer\_\_\_

<u>Liquor License Application Fees:</u>		
<u>Class C:</u>	Allows the sale of beer, wine and liquor for on-site consumption by customers	\$1,610.00
<u>SDD:</u>	Allows the sale of package liquor for consumption off-premises	\$1,560.00
<u>SDM:</u>	Allows the sale of beer and wine only for consumption off-premises	\$1,560.00
<u>Special:</u>	Allows non-profit organizations to obtain one day licenses to sell beer, wine and liquor to the public for on-premise consumption	\$40.00
<u>Tavern:</u>	Allows the sale of beer and wine only for on-site consumption by customers	\$1,610.00
<u>Transfer:</u>	Allows the transfer of ownership of an existing license	\$1,610.00

**GENERAL INFORMATION:**

Applicant's Name: \_\_\_\_\_ Title: \_\_\_\_\_  
 Business Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ email: \_\_\_\_\_  
 Driver's License: \_\_\_\_\_  
 Applicant's Date of Birth: \_\_\_\_\_

**SUBJECT PROPERTY:**

Location for License: \_\_\_\_\_  
 Parcel(s) Tax ID Number (s): \_\_\_\_\_  
 Legal Description: \_\_\_\_\_  
 \_\_\_\_\_  
 Zoning Designation of Property: \_\_\_\_\_  
 Description of Existing/Proposed Building Uses: \_\_\_\_\_  
 \_\_\_\_\_  
 Total Building Gross Square Footage: \_\_\_\_\_  
 Total Gross Square Footage Per Tenant Space: \_\_\_\_\_  
 Number of Parking Spaces On-site: \_\_\_\_\_

**Request for Special 24-Hour Licenses:**

Date of the Event \_\_\_\_\_

Please provide the following material at the time of application for a 24-Hour License:

- \_\_\_\_\_ State of Michigan Special License Application
- \_\_\_\_\_ Letter to clerk describing event and how alcohol will be served and monitored
- \_\_\_\_\_ Non-profit organization proof
- \_\_\_\_\_ Floor plan of special event area, including seating layout, bar area and exit locations

**Request for SDD and SDM Licenses:**

Please provide the following material at the time of application for an SDD or SDM license:

- \_\_\_\_\_ Site plan, including parking layout and on-site parking spaces
- \_\_\_\_\_ Photos of site
- \_\_\_\_\_ Evidence of financial responsibility
- \_\_\_\_\_ Personal and previous business references
- \_\_\_\_\_ Floor plan, including seating layout/bar and total occupant capacity

**Request for Transfer of Ownership of an Existing License:**

Please provide the following material at the time of application for a transfer of ownership of an existing license:

- \_\_\_\_\_ Site plan, including parking layout and on-site parking spaces
- \_\_\_\_\_ Photos of site
- \_\_\_\_\_ Evidence of financial responsibility
- \_\_\_\_\_ Personal and previous business references
- \_\_\_\_\_ Floor plan, including seating layout/bar and total occupant capacity

**Request for Class C or Tavern Licenses:**

Please provide a signed and completed Site Plan Application and the following material at the time of application for a Class C or Tavern license:

- \_\_\_\_\_ Site Plan, including parking layout and on-site parking spaces
- \_\_\_\_\_ Photos of site
- \_\_\_\_\_ Evidence of financial responsibility
- \_\_\_\_\_ Personal and previous business references
- \_\_\_\_\_ Floor plan, including seating and bar layout and total occupant capacity

All Class C or Tavern license requests require review by the Planning Commission and approval by the Township Board prior to the issuance of a liquor license. Please contact the Planning Division at 248-433-7795 regarding the submission of a site plan application.

***If you are submitting this application for a Class C or Tavern license, attach a separate document detailing how the establishment will address each of the criteria (1-9) outlined in the attached resolution.***

Has the applicant ever applied for a liquor license previously? \_\_\_\_\_  
Has this applicant ever been denied for a liquor license? \_\_\_\_\_  
Have there been any recent liquor licenses at this location? \_\_\_\_\_  
Has a Special Event Permit been applied for from the Planning Division? \_\_\_\_\_  
Do you have the approval/comment by the Subdivision Association? \_\_\_\_\_

**Signatures:**

By signing this application, the property owner, applicant, and contact person are indicating that all information contained in this application, all accompanying plans and all attachments are complete and accurate to the best of his or her knowledge. This application is not valid unless signed by the property owner. A review fee is required at time of application in accordance with the fee schedule as adopted by the Board of Trustees.

*Signature(s) of Owner* \_\_\_\_\_

\_\_\_\_\_  
*Print Name* *Date*

*Signature of Applicant:* \_\_\_\_\_

\_\_\_\_\_  
*Print Name* *Date*

*Signature of Contact Person:* \_\_\_\_\_

\_\_\_\_\_  
*Print Name* *Date*

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**OFFICE USE ONLY:**

Date Filed: \_\_\_\_\_ Application accepted by: \_\_\_\_\_

Fee Paid: \_\_\_\_\_ Receipt Number: \_\_\_\_\_

Decision on Application: Approved \_\_\_\_\_ Denied \_\_\_\_\_