



# CITY OF MONTGOMERY

P.O. BOX 708 MONTGOMERY, TEXAS 77356

Telephone: (409) 597-6434 / 597-6436 / 597-6866

DATE \_\_\_\_\_

## APPLICATION FOR THE SALE OF ALCOHOLIC BEVERAGE LICENSE

1. TYPE OF ALCOHOLIC BEVERAGE LICENSE:
  - \_\_\_\_\_ (1) CATEGORY A--OFF-PREMISES CONSUMPTION SALE OF ALL ALCOHOLIC BEVERAGES-- PACKAGE STORE.
  - \_\_\_\_\_ (2) CATEGORY B--OFF PREMISES CONSUMPTION SALE OF WINE, BEER OR ALE.
  - \_\_\_\_\_ (3) Category c--OFF PREMISES CONSUMPTION SALE OF BEER.
  - \_\_\_\_\_ (4) CATEGORY D--ON PREMISES CONSUMPTION SALE OF BEER AND WINE--RESTAURANT OR CAFE.
  - \_\_\_\_\_ (5) CATEGORY E--ON PREMISES CONSUMPTION SALE OF BEER--TAVERN, LOUNGE, OR BAR--THE SALE OF BEER FOR ON-PREMISES CONSUMPTION BEING THE PRINCIPAL BUSINESS LINE.
  - \_\_\_\_\_ (6) CATEGORY F--WAREHOUSE STORAGE OF BEER, WINE, OR LIQUOR FOR DISTRIBUTORS-- NO SALE OF BEER FOR ON OR OFF-PREMISES CONSUMPTION PERMITTED ON THE PREMISES.
2. LEGAL DESCRIPTION OF THE PROPERTY FOR WHICH LICENSE IS SOUGHT. (EITHER BY LOT AND BLOCK NUMBER OR BY A METES AND BOUNDS DESCRIPTION) \_\_\_\_\_
3. EXACT NATURE OF THE BUSINESS TO BE OPERATED (MUST BE FULLY DESCRIBED) . \_\_\_\_\_
4. ATTACH A PLAT OF THE PROPERTY TO THE APPLICATION SHOWING THE IMPROVEMENTS, PARKING AREAS, LOCATION OF SIGNS AND OTHER STRUCTURES ON THE PROPERTY AND WITHIN THREE HUNDRED (300) FEET TO SCALE.
5. DESCRIPTION OF SIGNS AND THE HOURS THEY WILL BE OPERATED.
6. ATTACH FLOOR PLAN OF THE BUILDING IN WHICH THE BUSINESS IS TO BE CONDUCTED (SHOWING FIXTURES, FURNITURE, REST ROOMS, KITCHEN AND OTHER EQUIPMENT).
7. ATTACH A VERIFIED STATEMENT OF STATING THAT THE BUILDING IS NOT WITHIN THREE HUNDRED (300) FEET OF A CHURCH, SCHOOL OR HOSPITAL AND THAT THE BUILDING IS IN COMPLIANCE WITH THE REQUIREMENTS OF THIS CHAPTER FOR SEPARATE AND ADEQUATE TOILET FACILITIES FOR MEN AND WOMEN IF USED FOR ON-PREMISES CONSUMPTION OF BEER, LIQUOR OR WINE.
8. BUSINESS OWNER \_\_\_\_\_ PHONE \_\_\_\_\_  
 ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_  
 HOME ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_
9. LAND OWNER \_\_\_\_\_ PHONE \_\_\_\_\_  
 ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_
10. BUSINESS PARTNERS \_\_\_\_\_ PHONE \_\_\_\_\_  
 ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_  
 HOME ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

\*\*\*\*\* THIS IS TO CERTIFY THAT I, THE \_\_\_\_\_ HAVE COMPLY WITH ALL STATE, COUNTY, CODES AND REGULATIONS OF THE CITY OF MONTGOMERY.

\_\_\_\_\_ OR \_\_\_\_\_  
 BUSINESS OWNER \_\_\_\_\_ PARTNER IF APPLICABLE  
 PERMIT FEE \_\_\_\_\_ DATE PAID \_\_\_\_\_  
 \_\_\_\_\_ DATE \_\_\_\_\_

APPROVAL : MAYOR