

City/Town of _____

Application for certificate of compliance for retail package store

Name of applicant (if applicant is a corporation, list all owners):

Street address of the proposed retail package store:

If the property is not owned by the applicant (the property is leased), applicant must attach a copy of the current lease agreement to this application.

Contact information for applicant:

Address: _____

Telephone number: _____

Email address: _____

I certify that I (as the applicant or applicants who are to be in actual charge of the business) have not been convicted of a felony within a ten-year period immediately preceding the date of application and, if a corporation, that the executive officers or those in control have not been convicted of a felony within a ten-year period immediately preceding the date of the application. I further certify that I am over 18 years of age and that the attached third-party criminal history record is accurate. I certify that the location for the package store complies with all zoning and other building requirements specified in the ordinance regulating package stores.

Signed:

Date:

For city use only:

Yes No

- | | | |
|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | Property complies with zoning regulations |
| <input type="checkbox"/> | <input type="checkbox"/> | Property complies with package store ordinance requirements |
| <input type="checkbox"/> | <input type="checkbox"/> | Applicant has satisfactory criminal history record |
| <input type="checkbox"/> | <input type="checkbox"/> | Approval of application will not exceed the number of permitted package stores per ordinance |
| <input type="checkbox"/> | <input type="checkbox"/> | Property ownership or lease agreement verified |