STATE OF CONNECTICUT DEPARTMENT OF CONSUMER PROTECTION Liquor Control Division Telephone: (860) 713-6210 Email: <u>dcp.liquorcontrol@ct.gov</u> Web Site: www.ct.gov/dcp/liquorcontrol



# **INSTRUCTIONS AND INFORMATION:** Patio, Extension of Use, and/or Additional Consumer Bar Application

# <u>PLEASE READ ALL INSTRUCTIONS AND INFORMATION BEFORE COMPLETING</u> <u>APPLICATION.</u> <u>APPLICATION WILL NOT BE ACCEPTED IF INCOMPLETE.</u>

## Fees and Form of Payment:

There are no filing fees for Patio and Extension of Use requests. However, if you are applying for an Additional Consumer Bar, please include \$190.00 for each bar requested. Checks may be made payable to "Treasurer State of Connecticut."

#### **The Application Process**

\*\*Once we are in receipt of your completed and correctly executed application, it will be reviewed by division licensing staff. If your application is incomplete, it will be mailed back with a deficiency notice with further instructions. After your application has been accepted, a permanent or seasonal patio or extension of use application request will be assigned to a Liquor Control Agent for an on- site inspection. A temporary/one day patio or extension of use request will be sent for consideration and approval before the Liquor Control Commission. You will be notified directly by the Department once your application has been approved.

\**Please Note - Permanent requests need to be completed only <u>once</u> and <u>should not be done on a yearly</u> <u>basis</u>, unless there has been a change from the original blueprint or sketch.\** 

## **Definitions**

**Permittee** – The permittee is the applicant for the liquor permit. The permittee is a person designated as the representative of the backer for the permit premises. The permittee must be able to read and understand English. The permittee can be the owner/backer of the business that holds the permit.

Backer – An individual or legal business entity that owns the business to which the liquor permit is issued.

**Authorized Backer Representative** – An individual who is legally authorized by the nature of the position held (i.e. corporate officer) in the business, or through a power of attorney to sign documents and make decisions related to the liquor permit.

# APPLICATION INSTRUCTIONS AND DOCUMENTS REQUIRED FOR A PATIO, EXTENSION OF USE AND/OR ADDITIONAL CONSUMER BAR APPLICATION TO BE ACCEPTED

## 1. PATIO or EXTENSION OF USE and/or ADDITIONAL CONSUMER BAR APPLICATION

Begin by checking the applicable box at the top of the application. It is possible to check the Additional Consumer Bar box together with the Patio or Extension of Use box. Be sure to clearly identify the number of additional consumer bars you are requesting and submit the applicable fee at the time of application. Complete both pages of the application. Every question must be answered, and all necessary approvals obtained (zoning, fire marshal, town clerk) If left blank, the application will not be accepted and returned for correction.

#### **Completing the Application**

#### Section A: Business Information

**Items #1 through #8** - Complete this section with your current business information and active permit number. If you would like an approval confirmation by email, please complete #8. **Item #9** – Please check one of the two boxes. Permanent requests (once approved) are intended to remain unchanged indefinitely for the duration of the liquor permit. If you select the Temporary request, the department will require that you list specific dates of events or length of use. All requests MUST HAVE original local official certification and approval before they can be approved by the Liquor Commission.

#### Section B: Approval/Certification of Local Officials

**Item #10 through #12** – This section needs to be signed and completed by your local public officials. No applications will be accepted without these signatures. If you are applying for a patio request, we will also require a local health official certification and approval.

# <u>Section C</u>: Certification of Permittee Applicant and Backer or Authorized Representative of Backer

**Items #13 -** The backer-owner or its authorized representative listed in #4 of this application must sign and date this section.

#### <u>Sketch</u>

On a separate piece of paper, submit a diagram, sketch, plan or blueprint of the layout of the premises, including patios, extension of use areas, **must be**  $8\frac{1}{2}$ " x 11" in size. Please include a general sketch of the currently approved premises in relation to the proposed patio or extension of use area. If there is an additional consumer bar, please clearly identify them on your sketch.

A diagram, sketch, plan or blueprint larger than  $8\frac{1}{2}$  x 11" will not be accepted. If needed, you may submit additional  $8\frac{1}{2}$  x 11" pages.

## 2. FEE AND FORM OF PAYMENT:

There are no filing fees for Patio and Extension of Use requests. However, if you are applying for an Additional Consumer Bar, please include \$190.00 for each bar requested. Checks may be made payable to "Treasurer State of Connecticut."

For Official Use Only

DCPLC – Patio-Ext of Use-ACB Appl Rev 3/17 STATE OF CONNECTICUT **DEPARTMENT OF CONSUMER PROTECTION** Liquor Control Division Telephone: (860) 713-6210 Email: <u>dcp.liquorcontrol@ct.gov</u> Web Site: <u>www.ct.gov/dcp/liquorcontrol</u>



# APPLICATION FOR PATIO, EXTENSION OF USE and/or ADDITIONAL CONSUMER BAR

PATIO (Restaurants & Cafes ONLY)	(All other permit types)		ACB (Additional Consumer Bar) # of ACB's: (FEE: \$190.00 each)		
Section A: BUSINESS INFORMATION					
1. Trade Name (DBA Name)			2. Permit Number		
3. Permittee Name (First, Middle, Last)					
4. Backer Name (Corporation, LLC, Partnership, Sole Proprietorship, etc.)					
5. Business Address		City		State	Zip Code
6. Business Telephone Number 7. Business	s Fax Number	8. Business Email Address			
9. Type of Request?		If <u>TEMPORARY is checked</u> , List Specific Dates Below:			
Section B: APPROVAL/CERTIFICATION OF LOCAL OFFICIALS					
10. <b>Zoning Authority Approval:</b> I certify that I am familiar with the zoning ordinances and bylaws of the city/town identified in Section A and on the sketch provided with this application, they do not prohibit the sale of alcoholic beverages under the type of liquor permit/establishment identified in this application.					
Signature of Zoning Official X Print Name					
Title of Official					
11. Fire Marshal's Approval: I certify that the premises identified in Section A and on the sketch of this application is safe for this type of request.					
Signature of Fire Marshal XPrint NamePrint Name					
Title of Official         Date//					
12. Local Health Approval: (Patio Requests ONLY) I certify that the Patio at the premises identified in Section A and on the sketch of this application meets local health approval.					
Signature of Health Official X	Print Name				
Title of Official         Date/					
Section C: CERTIFICATION OF BACKER OR AUTHORIZED REPRESENTATIVE OF BACKER					
13. <b>Backer Certification</b> ( <u>To be signed by backer</u> ) or the authorized representative of the backer)	Signed by Backer or Authorized Representative of Backer Da			Date:	
I certify that the information provided in this application is true to the best of my knowledge and	X				
that the permittee applicant identified in "Section A" of this application is designated as my principal representative on the premises for which this application is being submitted.	Print name of Backer	Print name of Backer or Representative		Title of Backer or Representative	

\*Attach a Sketch of the current premises, identifying the proposed Patio, Extension of Use area and/or ACB\*

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