CITY OF ABBEVILLE BEER AND/OR LIQUOR APPLICANTS

CITY HALL, 101 N STATE ST, ABBEVILLE LA 70510 – (337)898-4213



REQUIREMENTS - NEW LIQUOR LICENSES/PERMITS

STEP I: File completed Notice of Intent to apply for permit with City of Abbeville Permit Department.

Determine which Notice of Intent best fits the business plan - complete and return to City of Abbeville Permit Dept.

- (a) Notice of Intent for Corporation, LLC, Partnership, etc.
- (b) Notice of Intent for Individuals
- STEP II: Post sign (furnished by City of Abbeville) in the front of the business. Sign is to remain on the front of location (at all times) for fifteen (15) consecutive days.
- <u>STEP III:</u> Applicant is to complete the Liquor License Application, and the Affidavit confirming he/she meets the qualifications and conditions of R.S. 26:80 and R.S. 26:280, respectively {see attached copy}. Once filled out and notarized, submit to City of Abbeville's Permit Department with a colored copy of Driver's License or government-issued ID **{Give applicant a copy of application to submit to State}**
- STEP IV: Once applicant has applied with Louisiana Office of Alcohol & Tobacco Control {225-925-4041} submit the following to The City of Abbeville's Permit Department WITHIN 48 HOURS OF SUBMITTAL TO STATE:
 - (a) A copy of the application in it's entirety in which applicant submitted to Louisiana Office of Alcoholic Beverage Control Application.
- STEP V: Once The State Liquor License has been issued to applicant, applicant must:
 - (a) Submit the State issued Liquor License to The City of Abbeville's Permit Department
 - (b) The Liquor License Application packet will be sent to Mayor for review.
 - (c) Once approved, the applicant will be notified to come in and pay for the City of Abbeville's Liquor License.

REQUIREMENTS - RENEWALS

Submit ALL items below on or before December 1st of the current year:

- (a) Submit Current years State of Louisiana's Liquor License
- (b) Approved inspection report from the Vermilion Parish Health Unit dated within ninety (90) days of the renewal application.
- (c) Payment of Renewal Liquor License

The following City of Abbeville Ordinances provide guidelines

https://library.municode.com/la/abbeville/codes/code_of_ordinances ARTICLE II - CHAPTER 3 -SECTION 3 - 9 FETAL ALCOHOL SYNDROME; REQUIREMENT TO DISPLAY SIGN (SEE ATTACHED)

ABBEVILLE CITY COUNCIL

NOTICE OF INTENT (FOR CORPORATION, LLC, PARTNERSHIP, ETC)

	DATE:
NAME OF APPLICANT:	
MAILING ADDRESS:	
TRADE NAME:	
LOCATION OF BUSINESS:	
PHONE NUMBER:	
DATE OF FORMATION:	
APPLICANT FOR:	CLASS A LIQUOR
_	CLASS A BEER
-	CLASS B LIQUOR (PACKAGED ONLY)
_	CLASS B BEER (PACKAGED ONLY)
_	CLASS R (RESTAURANT)
	Signature of Authorized Officer or Member
	Print Name:
Sworn to and subscribed before	me this day of, 20

Notary Public	
Print Name:	
Notary Public ID #:	

ABBEVILLE CITY COUNCIL

NOTICE OF INTENT INDIVIDUAL

	DATE:		
NAME OF APPLICANT:			
MAILING ADDRESS:			
DATE OF BIRTH:	PLACE OF BIRTH:		
SEX:	RACE:		
TRADE NAME:			
LOCATION OF BUSINESS:			
PHONE NUMBER:			
APPLICANT FOR:	CLASS A LIQUOR		
-	CLASS A BEER		
-	CLASS B LIQUOR (PACKAGED ONLY)		
-	CLASS B BEER (PACKAGED ONLY)		
-	CLASS R (RESTAURANT)		
	Signature of Authorized Officer or Member		
	Print Name:		
Sworn to and subscribed befor	e me this day of, 20		

Notary Public	
Print Name:	
Notary Public ID #:	

CITY OF ABBEVILLE LIQUOR LICENSE APPLICATION



DAT	E:				
o Cl	LICATION FOR (Check all that LASS A LIQUOR LASS A BEER	applies): □ CLASS B LIQUOR (PACKAGED ONLY)			D ONLY)
APP	LICANT NAME:		CLASS R (RESTA	URANI)	
APP	LICANT HOME ADDRESS:				<u> </u>
		DATE OF BIRTH:			
		SOCIAL SECURITY			
SPC	OUSE'S NAME:				
NAM	IE OF BUSINESS:				
		·			
					<u></u> _
BUS	INESS PHONE:				
ANS	WER THE FOLLOWING QUES	TIONS FULLY AND COMPLETELY:			
1.	Are you the sole owner of the t	ousiness listed above?		🗆 Yes	🗆 No
2.	Is this business a partnership of	ship or association?		🗆 Yes	🗆 No
3.	3. Is there any other person, firm, corporation, or association financially interested in any way in the business? (if "yes" answer on the reverse side giving full name and % of interest)			□ Yes	□ No
4.	Have you ever been refused a	ave you ever been refused an alcoholic beverage permit?		□ Yes	□ No
5.	 Is the above business location presently licensed to sell alcoholic beverages? (if "yes" give the trade name of present business and owner.) 		□ Yes	□ No	
6.	Is the business to be conducte	d by a manager or agent? (if "yes" give the n	ame and address)	□ Yes	□ No

7. Do you own the premises, rent, or hold a bona fide written lease? (If you rent or lease, give the name and address of the owner or lessor and attach a copy of the lease or rental agreement.)

8.	Are you a citizen of the United States and the State of Louisiana?	🗆 Yes	🗆 No	
9.	Have you resided in the State of Louisiana continuously for a period of not less than 2 years prior to the date of filing this application?	D Yes	□ No	_
10.	Have you or anyone connected with this business ever been convicted of a felony under the laws of the United States, the State of Louisiana, or any other place?	□ Yes	🗆 No	_
11.	Have you or anyone connected with this business ever been convicted in this state, or in any other state, or by the United States, of the following: (if "yes" explain on the reverse side)			

		🗆 Yes	- No
a. :	soliciting for prostitution, pandering, letting premises for prostitution	1102	
	gambling, letting premises for gambling		🗆 No

11. Have you or anyone connected with this business ever been convicted in this state, or in any other state, or by the United States, of the following: (if "yes" explain on the reverse side)		
a. contributing to the delinquency of juveniles, any alcohol violations involving juveniles	□ Yes	🗆 No
b. keeping a disorderly place	Yes	🗆 No
c. narcotics	🗆 Yes	🗆 No
12. Have you or anyone connected with the business had a license to sell or deal in alcohol beverages issued by the United States, the State of Louisiana, or any other state, revoked withing five (5) years prior to the date of filing this application?	□ Yes	□ No
13. Are you the spouse, or were you ever the spouse, of a person who cannot qualify, or whose application has been denied, or whose permit has been revoked? (if "yes" answer part a or b)	□ Yes	D No
a. are you judicially separated?		🗆 No
b. are you divorced?	□ Yes	□ No
LIST ANY OTHER ALCOHOL LICENSED BUSINESS IN VERMILION PARISH WHEREIN YOU OR ASSO INVESTMENT.	CIATES H	IOLD AN
TRADE NAME ADDRESS %		

LIST OTHER PERSONS, FIRMS, CORPORATIONS, ETC. HOLDING ANY FINANCIAL INTEREST IN ANY WAY, IN THIS BUSINESS.

NAME	ADDRESS	% INTEREST	
<u></u>	r question #10 or #11 explain he	ere:	_
DATE	CHARGE	LOCATION	
			_ _ _
STATE OF LOUISIANA PARISH OF VERMILION			
	, being first duly sworn on nd that said answers in each instan	an oath, deposes and says that he/she has read each of the questi ce are true and correct.	ons
Sworn to and subscribed before r	ne this day of	, 20	
Notary Signature		Applicant Signature	-

CITY OF ABBEVILLE AFFIDAVIT CONFIRMING APPLICANT AND ALL INTERESTED PARTIES **MEETS THE QUALIFICATIONS AND CONDITIONS OF R.S. 26:80 & 26:280**



The undersigned does hereby attest and certify that the following information is true and correct:

1 am applying for a Liquor License from City of Abbeville to be able to sell and/or serve alcoholic beverages at a certain parcel of immovable property bearing the municipal address of ____

I understand that Louisiana law, R.S. 26:80 and 26:280, requires that the applicant and all interested parties seeking the issuance of The City of Abbeville's Liquor License; meets the qualifications and conditions of R.S. 26:80, and 26:280.

_____, being duly swom, hereby deposes and says: The undersigned, ____

1. I have read R.S. 26:80 and 26:280 State Statue for Qualifications to obtain a City of Abbeville Liquor License.

2. I declare that, I and all interested parties meet all qualifications of R.S. 26:80 and 26:280 of The State Statue.

Signature of applicant

Executed this ______ day of ______, 20_____.

NOTARY ACKNOWLEDGMENT

STATE OF ______PARISH OF ______

Notary Public Signature

Notary Printed Name

Notary I.D.#

- Sec. 3-9. Fetal alcohol syndrome; requirement to display sign.
 - (a) Each person holding a license issued under the provisions of this chapter shall post and display in a conspicuous place on each licensed premises a sign which shall clearly read as follow, to-wit:
 "WARNING: Drinking alcoholic beverages during pregnancy may cause severe physical or mental birth defects."
 - (b) Signs required to be posted or displayed herein shall be not less than eight (8) inches by ten (10) inches, with letters not less than three-eighths of an inch in height. Said signs must be substantially similar in design and color as the sample attached to this ordinance and available for inspection at the office of the secretary of the city council.
 - (c) The city may make such warning sign available to licensees under this chapter.
 - (d) Any licensee or permittee who shall violate the provisions of this section shall be punished in accordance with the provisions of the City of Abbeville Code of Ordinances, <u>section 1-5</u>. In the case of a corporation, the officer or agent in charge of the licensed premises shall be subject to prosecution for any violation of this section by such corporation.

(Ord. No. 93-10, 6-1-93)