



Utah Department of
Alcoholic Beverage Control
1625 South 900 West
P.O. Box 30408
Salt Lake City, UT 84130

**PRINCIPAL LICENSE
ADDITIONAL SUBLICENSURE
APPLICATION**

**PRINCIPAL
LICENSE Number**

Application Fee (non-refundable) \$300 + Additional Sublicense Fee \$2,250 = Total Sublicensing Fees \$ 2,550 Paid

PRINCIPAL LICENSEE INFORMATION

1. Ownership entity: _____ DBA: _____
2. Business phone: _____ Email: _____
3. Contact person: _____ Phone #: _____ Email: _____

- CHECKLIST:**
- Local consent form filled out from the city or county where the principal license is located
 - Business license submitted if required by the local jurisdiction for any added sublicense
 - Attach a floorplan for the sublicense being requested.

SUBLICENSURE INFORMATION

Please submit a new application separately for each sublicense requested

Type of sublicense:

DINING: Full Restaurant Limited Beer Only DBA: _____
Days / hours of operation: _____ Square footage: _____ # of Seating: _____
Projected monthly gross sales of food \$ _____ and Alcohol \$ _____

BAR: DBA: _____
Days / hours of operation: _____ Square footage: _____ # of Seating: _____
Projected monthly gross sales of food \$ _____ and Alcohol \$ _____

BEER RECREATIONAL: DBA: _____
Days / hours of operation: _____ Square footage: _____ # of Seating: _____
Projected monthly gross sales of food \$ _____ and Alcohol \$ _____

HOSPITALITY AMENITY: DBA: _____
Days / hours of operation: _____ Square footage: _____ # of Seating: _____
Projected monthly gross sales of food \$ _____ and Alcohol \$ _____

RESORT SPA (Applies to Resort Licenses Only): DBA: _____
Days / hours of operation: _____ Square footage: _____
Projected monthly gross sales of food \$ _____ and Alcohol \$ _____

SUBLICENSE MANAGEMENT

List all managers or employees appointed to manage or direct operations of the sublicenses. A criminal history background check must be submitted for each person listed. See Instructions for a list of documents required. US Citizen – if "no", provide residency status. Use additional sheets if necessary.

Name	Complete home address (include city, state, zip code)	Position Associated with which SUBLICENSE	Date of Birth <u>Day / Month</u> Year	US Citizen Y/N

Residency status (list and attach proof of residency status for all individuals who are not US citizens):

Criminal offenses: List all criminal offenses other than minor traffic offenses of which you or any person listed who have been convicted or pending criminal charges (name, criminal offense, date of conviction – use additional sheets if necessary)

Attestation:

Applicant agrees as a condition of licensing that he/she has read and will abide by the provisions of Title 32B, Utah Code, and all rules of the commission and directives of the Department of Alcoholic Beverage Control; and understands that failure to adhere or to no longer possesses the qualifications of a licensee may result in the suspension or revocation of the alcohol license and forfeiture of the compliance bond.

Applicant agrees to immediately notify the department of any change in ownership entity and understands that failure to do so may result in immediate suspension of the license

The undersigned verifies that the premises will not be used for permitting gambling or any other violation of law or ordinance.

The undersigned hereby authorizes the department access to federal, state, and local sales, payroll, income, and real and personal property tax information.

The undersigned verifies that the applicant is in compliance with all federal and state laws pertaining to payment of taxes and contributions to unemployment and insurance funds.

The undersigned applicant does not and will not discriminate against persons on the basis of race, color, sex, religion, ancestry, or national origin.

The undersigned hereby voluntarily consents that representatives of the Alcoholic Beverage Control Department, Commission, State Bureau of Investigation (Bureau of Alcoholic Beverage Law Enforcement), and any other law enforcement agencies shall be admitted immediately and permitted without hindrance or delay to inspect the entire premises and all records of the licensee.

The undersigned acknowledges that he/she has read and understands the statements herein and that the execution thereof is done voluntarily and by authorization of the applicant entity; and that any false statement made on this application or any other related document is a second-degree felony.

The undersigned hereby makes application to the Utah Alcoholic Beverage Control Commission and certifies that the information contained herein and attached hereto is true and correct.

Date

Applicant / Owner

Title / Position

Authorized Signature

State of _____

County of _____ Subscribed and

Sworn before me this _____ day of _____, 20_____

Notary Signature

Seal