

CHARTER TOWNSHIP OF WATERFORD
CLERK'S OFFICE
5200 CIVIC CENTER DRIVE
WATERFORD, MI 48329
PHONE: (248) 674-6210

APPLICATION FOR LIQUOR LICENSE

FOR TOWNSHIP USE ONLY.	
Date: _____	Fee \$350 Receipt no. _____ Phone no. _____
Applicant Name: _____	
Address of Business: _____	
CLASS _____ NEW _____ TRANSFER _____ FROM OTHER COMMUNITY _____	

To the Applicant(s):

A non-refundable fee of \$350 must accompany this application. Incomplete applications will be returned to the applicant. By filling out this application form in full and attaching the materials requested, you will assist the Charter Township of Waterford in its effort to promptly review your application for a liquor license. The information contained in this application is the minimum required under the liquor control ordinance. Please attach any additional information or materials you believe will assist the township in its review of your proposal. This application must bear the signature of the property owner (or the duly authorized representative of all ownership interests) as well as the signature of the applicant or applicant's representative (if different than the property owner). *Waterford will not approve the transfer of a Class C license within three years of the date of its original issuance. See page 17 for details.*

Contact Person: _____

Phone Number(s): _____ Cell: _____

E-Mail: _____ Fax: _____

- Individual Applicant. Complete page 2, and pages 11-15.*
- Partnerships – Must include a list of all partners, their home address and phone numbers of home and business. Complete pages 3-4, and pages 11-15.*
- Corporation – Must include a list of all partners, their home address, phone number(s) of home and business. Application must be signed by the person having authority to do so. Complete pages 5-7, and pages 11-15.*
- Limited Partnership – Must include a list of general partners and limited partners and their home address, phone numbers of home and business. Complete pages 8-15.*

Note: This application is required for all classes of Liquor licensing.

SECTION 1 – INDIVIDUAL APPLICANT INFORMATION

A. FOR AN INDIVIDUAL APPLYING FOR A LICENSE:

Name: _____ Date of Birth: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell _____

Fax: _____

E-Mail: _____

Have you lived at the same address the last two years? Yes _____ No _____

If your answer to this question was "No", list any other residence address for the last two years:

Street Address: _____

City: _____ State: _____ Zip: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Citizenship: _____ Place of Birth: _____

Are you are a naturalized citizen of the United States? Yes _____ No _____

If your answer to this question was "Yes":

Date of Naturalization: _____ Place of Naturalization: _____

B. OR A PARTNERSHIP APPLYING FOR A LICENSE (Complete for each person that is entitled to share in the profits of the partnership):

Name: _____ **Date of Birth:** _____

Street Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone: _____ **Cell** _____

Fax: _____

E-Mail: _____

Have you lived at the same address the last two years? Yes _____ No _____

If your answer to this question was "No", list any other residence address for the last two years:

Street Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone: _____

Street Address: _____

City: _____ **State:** _____ **Zip:** _____

Phone: _____

Citizenship: _____ **Place of Birth:** _____

Are you a naturalized citizen of the United States? Yes _____ No _____

If your answer to this question was "Yes":

Date of Naturalization: _____ **Place of Naturalization:** _____

Name: _____ Date of Birth: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Cell _____

Fax: _____

E-Mail: _____

Have you lived at the same address the last two years? Yes _____ No _____

If your answer to this question was "No", list any other residence address for the last two years:

Street Address: _____

City: _____ State: _____ Zip: _____ Phone _____

Street Address: _____

City: _____ State: _____ Zip: _____ Phone _____

Citizenship: _____ Place of Birth: _____

Are you a naturalized citizen of the United States? Yes _____ No _____

If your answer to this question was "Yes":

Date of Naturalization: _____ Place of Naturalization: _____

Name: _____ Date of Birth: _____

Street Address: _____

City: _____ State: _____ Zip: _____ Phone _____

Have you lived at the same address the last two years? Yes _____ No _____

If your answer to this question was "No", list any other residence address for the last two years:

Street Address: _____

City: _____ State: _____ Zip: _____ Phone _____

Street Address: _____

City: _____ State: _____ Zip: _____ Phone _____

C. FOR CORPORATION APPLYING FOR A LICENSE:

Please state the purpose for which the corporation was formed:

State of Incorporation: _____ Date when charter was issued: _____

Is majority of stock owned by a single entity or person not listed here? _____

If yes, provide name(s) _____

Officers of Corporation: (Complete for each officer)

Name: _____ Position: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Date of Birth: _____

Have you lived at the same address the last two years? Yes _____ No _____

If your answer to this question was "No", list any other residence address for the last two years:

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Citizenship: _____

Place of Birth: _____

Are you a naturalized citizen of the United States? Yes _____ No _____

If your answer to this question was "Yes":

Date of Naturalization: _____ Place of Naturalization: _____

Name: _____ Position: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Date of Birth: _____

Have you lived at the same address the last two years? Yes _____ No _____

If your answer to this question was "No", list any other residence address for the last two years:

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Date of Birth: _____

Citizenship: _____ Place of Birth: _____

Are you a naturalized citizen of the United States? Yes _____ No _____

If your answer to this question was "Yes":

Date of Naturalization: _____ Place of Naturalization: _____

Name: _____ Position: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Date of Birth: _____

Have you lived at the same address the last two years? Yes _____ No _____

If your answer to this question was "No", list any other residence address for the last two years:

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Citizenship: _____ Place of Birth: _____

Are you a naturalized citizen of the United States? Yes _____ No _____

If your answer to this question was "Yes":

Date of Naturalization: _____ Place of Naturalization: _____

Name: _____ Position: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Date of Birth: _____

Have you lived at the same address the last two years? Yes _____ No _____

If your answer to this question was "No", list any other residence address for the last two years:

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Citizenship: _____ Place of Birth: _____

Are you a naturalized citizen of the United States? Yes _____ No _____

If your answer to this question was "Yes":

Date of Naturalization: _____ Place of Naturalization: _____

D. FOR LIMITED LIABILITY COMPANY APPLYING FOR A LICENSE:

Please state the purpose for which the company was formed: _____

State in which company was formed: _____ Date formed: _____

Managers, members and resident agents of Company (complete for each)

Name: _____ **Position:** _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Date of Birth: _____

Have you lived at the same address the last two years? Yes _____ No _____

If your answer to this question was "No", list any other residence address for the last two years:

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Citizenship: _____ Place of Birth: _____

Are you a naturalized citizen of the United States? Yes _____ No _____

If your answer to this question was "Yes":

Date of Naturalization: _____ Place of Naturalization: _____

Name: _____ Position: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Date of Birth: _____

Have you lived at the same address the last two years? Yes _____ No _____

If your answer to this question was "No", list any other residence address for the last two years:

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Citizenship: _____ Place of Birth: _____

Are you a naturalized citizen of the United States? Yes _____ No _____

If your answer to this question was "Yes":

Date of Naturalization: _____ Place of Naturalization: _____

Name: _____ Position: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Date of Birth: _____

Have you lived at the same address the last two years? Yes _____ No _____

If your answer to this question was "No", list any other residence address for the last two years:

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Citizenship: _____ Place of Birth: _____

Are you a naturalized citizen of the United States? Yes _____ No _____

If your answer to this question was "Yes":

Date of Naturalization: _____ Place of Naturalization: _____

Name: _____ Position: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Date of Birth: _____

Have you lived at the same address the last two years? Yes _____ No _____

If your answer to this question was "No", list other residence address for the last two years:

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

Citizenship: _____ Place of Birth: _____

Are you a naturalized citizen of the United States? Yes _____ No _____

If your answer to this question was "Yes":

Date of Naturalization: _____ Place of Naturalization: _____

SECTION 2 - LOCATION OF PROPOSED FACILITY

Address: _____

Parcel ID Number: _____

Existing Zoning of Parcel: _____

Existing Use of Parcel: _____

SECTION 3 - PROPERTY OWNER (IF DIFFERENT THAN APPLICANT)

Name: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Phone: _____

SECTION 4 - CHARACTERISTICS OF PROPOSED FACILITY

Describe the street or road on which the property is situated: _____

Describe all of the land uses surrounding the property, including those on each side, behind, and across the street from the property in question: _____

State the total square footage of each building proposed on the property: _____

Describe the day-to-day operation of the proposed business: _____

Has there been an application been made for any other license for this location before?

Yes _____ No _____

If the answer to this question is "Yes":

Type of license: _____ Date of Application: _____

Disposition: _____

SECTION 5 - BUSINESS HISTORY

Does the Applicant currently hold a Class C liquor license? Yes _____ No _____

If the answer to this question is yes:

Business Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Year license was obtained: _____

Has the Applicant previously held a Class C Liquor License? Yes _____ No _____

If the answer to this question is yes:

Business Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Year license was obtained: _____

Business Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Year license was obtained: _____

Has the Applicant ever had a Class C Liquor License suspended or revoked?

If the answer to this question is yes:

Business Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Year license was suspended or revoked: _____

Reason for the suspension or revocation: _____

Has the Applicant previously made application for a Class C Liquor License at any another location?

If the answer to this question is yes:

Business Name: _____

Address: _____

City: _____ State: _____ Zip: _____

Year of application: _____

Disposition: _____

SECTION 6 - VIOLATION HISTORY

Has Applicant/any partner/officer/manager/member/resident agent been convicted of:

- (a) a felony?
- (b) Operating under the Influence of Liquor/Controlled Substance?
- (c) Operating with an Unlawful Bodily Alcohol Level?
- (d) Operating While Intoxicated?
- (e) Operating While Visibly Impaired?
- (f) Selling/Furnishing Alcohol to a Person Under 21?

If the answer to any of these questions is "Yes":

Date: _____ Location: _____

Description: _____

Date: _____ Location: _____

Description: _____

Does the applicant/any partner/officer/manager/member/agent have a permit to carry a concealed weapon? _____ Do you plan to keep weapon on premises? _____

SECTION 7 - ATTACHMENTS

The following attachments shall be included with the Application. Please letter each attachment as indicated:

_____ A. A preliminary site plan showing the relationship of the proposed or existing building to the surrounding property and uses, including proposed parking facilities and lighting. An architect's rendering of the building must accompany the preliminary site plan.

_____ B. A statement as to the Applicant's experience in owning, managing, operating, and/or financing this type of business or any related business, including previous business references.

_____ C. A statement and supporting documentation providing evidence that the Applicant is financially able to meet the obligations and business undertakings for which the license is to be issued.

_____ D. If this is an application involves the transfer of a Class C Liquor License within three (3) years of its original issue date, a copy of the executed and binding contract for the buy/sell of the License and/or the business for review.

SECTION 8 – RELEVANCE TO COMMUNITY GOALS

Describe what you believe are the overall benefits that the proposed establishment would provide to the Township and the betterment of the community: _____

Describe what impact the proposed establishment will have on the character of the area

SECTION 9 - PERMISSION TO ENTER PROPERTY FOR INSPECTION

The Applicant gives permission to the Officials of the Charter Township of Waterford and its Consultants to enter the property that is the subject of this Application for purposes of inspection to review and verify the information on the Application. This inspection will occur during business hours and will only include entry into a building upon mutually agreeable arrangement with the Applicant and/or property owner.

SECTION 10 - CERTIFICATION

I hereby swear or affirm that the information contained within this Application is true to the best of my knowledge, information and belief. I acknowledge that any false statement or material misrepresentation in this Application is grounds for denial of this application, or, if a license has previously been issued on the basis of this Application, revocation of that license.

I further swear or affirm that if this Application is granted and a license is issued, the Applicant will not violate any applicable laws or ordinances of the State of Michigan, County of Oakland, or Township of Waterford in the conduct of the business.

I understand and agree that adult entertainment will not be permitted in the establishment. Adult entertainment includes, but is not limited to, nudity, nude dancing, lap dancing, topless dancing, wet tee-shirt contests, or any actual or simulated sexual acts. I understand and agree that permitting adult entertainment in the establishment is grounds for the Township to request that the State revoke any liquor license issued for the establishment.

- I have attachments with this application.
- I do not have attachments with this application.

Applicant's Signature: _____ Date: _____

Notary Stamp: _____

Notary Signature: _____ Date: _____ Time _____

Transfer of Class C license within three years of the date of original issuance:

The Township Board has determined that profiteering by Class C liquor license holders is contrary to the best interests of the Township. Accordingly, in order to prevent profiteering, to the full extent authorized by law the Township Board shall not approve the transfer of a Class C liquor license within three years of the date of the original issuance of the license. An agreement between the applicant and the Township, following recommendation by the Township Attorney shall be prepared and agreed upon to give effect to this provision prior to final action being taken by the Township Board on an application. The Township Board may, but is not required to, excuse the above anti-profiteering limitation for any of the following reasons:

1. If the license holder is a natural person, he or she dies or becomes incapacitated.
2. If the license holder is a corporation, the majority shareholder dies or becomes incapacitated, or the corporation dissolves for reasons other than to transfer the license.
3. If the license holder is a limited liability company, the company dissolves for reasons other than to transfer the license.
4. The license holder and the proposed license transferee establishes that the transfer of the Class C liquor license shall not result in profiteering.
5. The application of this anti-profiteering limitation will subject the applicant to financial hardship due to no fault of the applicant, such as a change in the business climate, illness or death, labor or supply problems, and/or other factors outside the applicant's control.

The agreement shall provide that, unless excused by the Board as provided above, in the event a license is placed into escrow with the Liquor Control Commission within three years from the date of issuance, the Township Board may approve the issuance of the license to a new applicant without payment to the licensee from whom the license had been placed into escrow, and that a licensee waives any property interest in such license upon placement of the license into escrow within such three year period; provided, however, prior to the approval of such issuance to a new applicant, the person or entity from whom the license had been placed into escrow shall be afforded written notice and an opportunity to be heard, and all objections raised at the hearing shall be resolved (at the Commission or in the circuit court if necessary) prior to issuance to a new applicant.