

Town of Harrison
Plan of Operation
for Alcohol Beverage License Application
for Applicants not licensed within the last 5 years

Your application will be returned for failure to fill out this form completely, correctly, and submit the required Detailed Floor Plan as outlined. You are required to attach a narrative describing how your business is a benefit to the community.

Business Name:

Address of Premises:

Business Telephone Number:

Business Mailing Address - if different from address of premises:

Business Internet/E-mail Address:

Business Fax Number:

Owner's Name:

Owner's Phone Number:

Owner's Address – include city, state, zip code:

Will the agent, a partner of the individual licensee be conducting the day-to-day operations of the business: Yes ___ No ___ If no, list name and address of person who will:

Does anyone else have money invested or any interest in this business? Yes ___ No ___

If yes, explain:

Briefly detail the type of business you plan to operate, if granted a license:

What other types of permits will you or do you hold at this location?

Food (through Health Dept.) _____

Cigarette _____

Other (s) _____

If applying for a Class B or C license, what type of food service will you have? (check all that apply):

None ____ Appetizers ____ Prepackaged Foods ____ Catered Events ____ Snacks ____
Full Meals ____

What percentage of your total sales will be from the sales of alcohol beverages? _____ %

Do you have future plans for other businesses, licenses or permits at this location? Yes ____ No ____

If yes, explain:

Is this a franchise? Yes ____ No ____

Is this premises currently or ever been licensed? Yes ____ No ____

If yes, list type of license:

What is the zoning classification for this premise?

Legal Capacity/Occupancy of Premises: Inside _____ Outside _____

Number of Parking Spaces on the premises, not including road parking: _____

LITTER/GARBAGE:

What are your plans to keep the grounds clean (check all that apply):

Sweep ____ Pressure Wash ____ Pick Up Litter ____ Hired Maintenance ____ Garbage Cans
Outside ____ Other: _____

NOISE:

How will issues be addressed? (check all that apply):

Security ____ Manager approaches customer (s) ____ Call law enforcement ____ Signs posted ____
Other: _____

Please attach a narrative describing how your business is a benefit to the community.

DETAILED FLOOR PLAN

Please read all instructions before preparing the floor plan.

- A detailed floor plan must be submitted with this application.
- Even if the premises has been previously licensed and a floor plan submitted, a new floor plan must be submitted with this application.
- The floor plan must be filed on 8 ½ x 11 inch sized paper. Plans do not need to be architectural drawings and need not be to scale. Handwritten plans are acceptable.
- A separate sheet of paper should be filed for each floor where alcohol will be stored, displayed, sold, given away and/or consumed.

The floor plan must include all of the following items:

1. Dimensions and total square feet of the premises (length x width = square feet)
2. Label all entrances and exits
3. Label and provide dimensions (length & width) of all alcohol storage areas (coolers, stock room, basement, etc.)
4. Label and provide dimensions (length & width) of all alcohol display areas (behind the bar, shelves, etc.)
5. Class B & C applicants only: Label and provide dimensions (length & width) of all outdoor areas used for the sale or service of alcohol beverages (for example, patios, beer gardens, sidewalk cafes)
6. Class B & C applicants only: Label all seating areas, bars, and food preparation areas (kitchen)
7. Label and provide dimensions (length & width) for the first floor showing the relation of all parking areas on the premises to the building, not including road parking
8. On each page mark the following: North , Date, Business name & address

Signature of Individual/Partner/Officer

Signature of Partner/Officer