



## APPLICATION FOR PERMISSION TO MAKE ALTERATIONS Wholesalers

**This application must be filed with the Albany office of the State Liquor Authority located at:  
80 South Swan Street, Suite 900, Albany, NY 12210-8004**

**NO FEE IS REQUIRED**

**This application must be accompanied by the following:**

- A diagram showing the **existing** layout of the entire premises (interior and exterior) on a single sheet of 8.5" x 11" paper
- A diagram showing the **proposed** layout of the entire premises (interior and exterior) on a single sheet of 8.5" x 11" paper
- Financial documentation showing the availability of funds to be used to cover the costs of the proposed alterations
- Photographs of the area to be altered as it appears when filing the Alteration Application
- An updated Establishment Questionnaire with answers reflecting the entire premises after the proposed alterations
- An amended lease agreement if space that was not previously included in the demised premises is being added

**If the application is conditionally approved the following items may be required prior to final approval:**

- Copies of all relevant permits, including building permits, sidewalk cafe permits, etc.
  - Photographs of the premises showing all alterations complete
  - The standardized Statement of Completion of Alterations, completed and returned to the Authority
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Before any **SUBSTANTIAL ALTERATION** to a licensed premises may be undertaken by or on behalf of any licensee, except a Farm Winery, the licensee shall apply to the State Liquor Authority for permission to do so. A substantial alteration shall include any enlargement or contraction of a licensed premises; any physical change to the exterior of the licensed premises that involves the creation or relocation of any window or door, or reduces the visibility that existed at the time of licensing; any physical changes in the interior that materially affect the character of the premises or physical structure that existed at the time of licensing; and (in the case of establishments licensed for on-premises consumption) any enlargement or reduction of the dining or kitchen facilities or any change in the size or location of any bar from which alcoholic beverages are served.

**MINOR ALTERATIONS** shall be deemed to be one costing and valued at less than \$10,000, which does not affect the material character or physical structure that existed at the time of licensing. Before commencing work on the alteration, the licensee must request permission to effect such minor alteration by submitting this application, in person or by certified mail (return receipt requested). The request must include: a description of the proposed alteration; the cost and value of the alteration; and the source of the monies to be used to pay for the alteration.

*After receiving the application, the State Liquor Authority will have 20 days to review the proposed alteration. If there is any objection, the Authority will notify the licensee by certified mail. If no objection is made within 20 days after reviewing the necessary forms, it shall be deemed that permission has been granted. Work may commence on the alteration if no objection is received by the 25th day after filing.*

**Alcoholic beverages may not be kept or sold in any added space until the Alteration is approved.**



# APPLICATION FOR PERMISSION TO MAKE ALTERATIONS

**This application must be filed with the Albany office of the State Liquor Authority located at:  
80 South Swan Street, Suite 900, Albany, NY 12210-8004**

## **NO FEE IS REQUIRED**

**The licensee named below hereby requests the permission of the State Liquor Authority to make alterations to the licensed premises as set forth below.**

License ID #: County: Phone #:

Full name of Licensee as listed on the License:

Trade Name (DBA) as listed on the License:

**Address of the Licensed Premises:**

**City:** \_\_\_\_\_ **Zip Code:** \_\_\_\_\_

**Business Email Address:**

**Post Office/Mailing Address (if different than premises):**

**1. CHECK ONE:**      **Substantial Alteration**      **Minor Alteration**

**2. List proposed alterations (describe all changes fully. If more space is needed, attach additional sheets):**

3. Is space being added or eliminated from the licensed premises?

3a. If added, provide size, location and use of space:

3b. If additional space is added, provide name of landlord and terms of lease, if applicable (*a copy of an amended lease may be required*):



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4. Is a building permit required for the proposed alterations by the municipality?      Yes      No

4a. If yes, give permit number and issuing municipality:

Provide a copy of the permit.

5. Will any entrance or exit of the premises as altered be within 200' of the entrance to a school, church or synagogue, or other place of worship?      Yes      No

6. Is there a change of premises address due to the alteration?      Yes      No

(If the address of the premises has changed since the last application, submit a written explanation or letter from the Post Office, as well as an Endorsement Application to amend the address.)

6a. If yes, provide eliminated address and/or additional address:

7. Estimated cost of alteration:

7a. Sources of funds used to pay for alteration:

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The undersigned, each for himself, certifies that he/she is the applicant above named; that he/she knows the contents of the above application and the statements contained therein and the same are true of his/her own knowledge.

certifies that he/she is

(Print Name)

(Title)

of the above named applicant corporation; that he/she knows the contents of the above application and the statements and answers therein; that the same are true of his/her knowledge; that he/she has been authorized, by order of the Board of Directors of said applicant corporation to make the statements and answers in this application on behalf of said applicant corporation with the same force and effect as if said corporation made such statements and answers itself. The undersigned also certifies that he/she will meet all local code requirements of the municipality in which the premises is located and obtain any necessary permits required of him/her in order to perform the alteration within the boundaries of the law.

(Signature of Authorized Principal and/or each Partner)

(Date)

[OFFICE USE ONLY]

DATE FILED:

License ID#:

Approved

Disapproved

License Board Member

Date



OFFICE USE ONLY		
<input type="radio"/> Original	<input type="radio"/> Amended	Date _____

## PREMISES QUESTIONNAIRE

**1. Describe the area where the premises is to be located:**      Residential      Business      Agricultural

**1a. State what the area is zoned for:**

(e.g., Residential, Business, Mixed, etc.)

**2. Premises**

a. Please provide a description of the premises to be licensed. Describe all building/structures that will be utilized in business operations including the number of floors in each. (e.g., 2 story free-standing, office building - include suite number, including a basement, etc.)

b. Has the building/premises been known by any other address?      Yes      No

If YES, please specify:

c. Has the premises to be licensed and/or any other floor in the building been previously licensed or are either currently licensed to traffic in alcoholic beverages?      Yes      No

d. What was the prior use of the premises to be licensed?

e. Does the proposed location of the business comply with all state and local regulations and zoning codes?

Yes      No

f. Is there interior access to any other floor(s) that will not be part of the licensed premises?      Yes      No

If YES, please list floor(s) and means of access to each floor (e.g., stairs, elevators, etc. - must be shown on diagram). Also list use of floor(s) (e.g., apartments, offices, etc.)

g. Does any other person have access to this area?      Yes      No

h. Where will the alcohol be stored? (*wholesalers/importers without interior access to the storage area may require a warehouse permit.*)