

APPLICATION FOR PERMISSION TO MAKE ALTERATIONS On-Premises Establishment

**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
- If located in New York City, submit proof of the mailing or delivery of the Standardized Notice Form for providing 30-day advance notice to the Community Board
- 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
- If an additional bar is being added, submit an application for Additional Bar along with the applicable fee
- 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
- A new Certificate of Occupancy or Certificate of Completion if required by the local municipality
- The standardized Statement of Completion of Alterations, completed and returned to the Authority

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

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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:

8a. Present seating capacity at tables:

8c. Present total length of bar:

8b. Proposed seating capacity at tables:

8d. Proposed total length of bar:

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.

By checking this box I agree, and it is my intent, to electronically sign this document. By submitting this e-document to the New York State Liquor Authority in this way, I understand that my electronic signature I added to the signature line below is the legal equivalent of having placed my handwritten signature and affirmation on the submitted document and I am affirming the truth of the information contained therein.

(Signature of Authorized Principal and/or each Partner)

(Date)

[OFFICE USE ONLY]			
Application ID #	Approved/Disapproved	License Board Member	Date

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

ESTABLISHMENT QUESTIONNAIRE

In this section you must describe the premises to be licensed. Answer ALL questions completely. Please do not answer "see attached" to any question. Any incomplete answer may delay or prevent the processing of the application.

Helpful Hint: Drawing your diagram and reviewing your photographs may assist you in completing this section. See sample diagrams at the end of this application.

1. Zoning

1a. State what the area is zoned for:
(e.g., Residential, Business, Mixed etc.)

1b. Does the premises have a **VALID CERTIFICATE OF OCCUPANCY** and **ALL** appropriate permits? Yes No Pending

2. Premises

2a. Describe the type of building in which the premises will be located.

2b. Is or has the building/proposed premises been known by any other address? Yes No

If YES, please specify:

If the address was changed due to a 911 update or other government action, please include documentation for the change.

2c. Is there currently an active license or has there ever been a license to traffic in alcoholic beverages at this location?

Currently Licensed Previously Licensed Never Licensed Do Not Know

Name of Licensee:

License ID Number:

2d. Are there any disciplinary actions pending against the applicant, current licensee or prior licensee?

Yes No Do Not Know

Any pending disciplinary action may delay a determination on this application or result in the disapproval.

2e. If the proposed premises has never been licensed, what was the prior use?

2f. Is any other floor or area of the building currently licensed? Yes No

Name of Licensee:

License ID Number:

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

3. Premises (interior):

3a. List the total number of floors of the business establishment to be licensed, including the basement:

3b. List the floor(s) where the proposed premises will be located:
(e.g., basement, ground floor, 2nd & 3rd floor, etc.)

3c. Where is the alcohol stored?

3d. Is there interior access to any other floor(s) or area(s) that will not be part of the premises to be licensed?
If yes, show the means of access on the interior diagram(s).

Yes No

3e. Are the premises to be licensed divided in any way, by a public or private passageway, over which the applicant does not have exclusive possession and control?
(e.g., hallway, stairwells, common areas, etc.)

Yes No

If YES, describe:

3f. How many public restrooms? If less than two (2) public restrooms, you must request a waiver of the two (2) restroom rule in writing. Please show restrooms on diagram.

3g. List the maximum occupancy of the premises:

3h. Number of tables?

3i. Number of seats at tables?

3j. Number of seats at bar or counter?

4. Bars:

4a. How many customer bars are located on the premises?
(a customer bar is where patrons may order, purchase or receive alcoholic beverages)

4b. How many service bars? *(a service bar is for wait staff use exclusively)*

4c. Describe each bar in the fields below:

Bar 1

Bar 2

Bar 3

Bar Type:

Bar Type:

Bar Type:

Length:

Length:

Length:

Shape:

Shape:

Shape:

Location:

Location:

Location:

(If the location of your bar is not listed as a choice in the drop-down menu, please type in your answer.)

Attach additional sheets if there are more than 3 bars.

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

5. Kitchen:

5a. Does the premises have a full kitchen? Yes No

If NO, does the premises have a food preparation area? Yes No

Show Kitchen or Food Prep Area on the Interior Diagram

NOTE: FOOD MUST BE AVAILABLE FOR SALE DURING ALL HOURS OF OPERATION; SUBMIT A MENU

5b. Is a chef/cook employed at the premises? Yes No

If YES, please list hours of day chef/cook will devote to the premises:

6. Hotel or Bed & Breakfast:

6a. How many floors?

6b. How many guest rooms?

6c. For Hotels Only: Is there a public restaurant on the hotel premises? Yes No

7. Outdoor Areas:

7a. Are there any outside areas used for the sale or consumption of alcohol? Yes No

7b. If YES, what is the outside occupancy?

7c. Check all types that apply:

Note: there must be direct access from the interior of the premises to any outdoor area(s) that you wish to license. Show access on diagram.

- | | | | | |
|---------------|------|---------|----------|--------|
| Sidewalk Cafe | Deck | Patio | Porch | Gazebo |
| Rooftop | Yard | Balcony | Pavilion | Tent |

Other (describe):

7d. Is the outdoor area(s) divided by any public or private passageway or area that the applicant does not have exclusive control? Yes No

If YES, how is it divided?

7e. How is the outdoor area(s) contained? Check all that apply and show enclosure on diagram.

- | | | | | |
|---------|------|-----------|--------|------------|
| Fencing | Wall | Shrubbery | Roping | Stanchions |
|---------|------|-----------|--------|------------|

Other (describe):

7f. Is a permit required by the locality for outside area(s)? Yes No

If YES, submit a copy of the permit, the permit application, proof of workers' compensation and proof of liability insurance to provide coverage for "injury sustained by persons on the contiguous municipal public space or non-contiguous municipal public space used by the licensee and, if applicable, persons and cyclists using or crossing a bike thoroughfare that connects the licensed premises to the non-contiguous municipal space used by the licensee."