



Confirmation Number: 20190206110654576



Type License: 140 - SPECIAL EVENTS RETAIL

State: \$150.00 County: \$212.00

Type License:

State:

County:

Trade Name: YOUNG PROFESSIONALS

Filing Fee: \$50.00

Applicant: THE PARK AT OWA LLC

Transfer Fee:

Location Address: PUBLIC AREA BEHIND FOUNTAIN ACROSS FROM SUITE 101A FOLEY, AL 36535

Mailing Address: 1501 SOUTH OWA BLVD

FOLEY, AL 36535

County: BALDWIN Tobacco sales: NO

**Tobacco Vending Machines:** 

Type Ownership: LLC

Book, Page, or Document info: BOOK 633 PAGE 279-282

Date Incorporated: 02/27/2018 State incorporated: AL

**County Incorporated:** 

Date of Authority: 02/27/2017

Alabama State Sales Tax ID: R009722282

Federal Tax ID: 82-0634924

Name:	Title:	Date and Place of Birth:	Residence Address:
			Ţ.

Has applicant complied with financial responsibility ABC RR 20-X-5-,14? YES

Does ABC have any actions pending against the current licensee? NO

Has anyone, including manager or applicant, had a Federal/State permit or license suspended or revoked? NO Has a liquor, wine, malt or brewed license for these premises ever been denied, suspended, or revoked? NO Are the applicant(s) named above, the only person(s), in any manner interested in the business sought to be licensed? YES

Are any of the applicants, whether individual, member of a partnership or association, or officers and directors of a corporation itself, in any manner monetarily interested, either directly or indirectly, in the profits of any other class of business regulated under authority of this act? NO

Does applicant own or control, directly or indirectly, hold lien against any real or personal property which is rented, leased or used in the conduct of business by the holder of any vinous, malt or brewed beverage, or distilled liquors permit or license issued under authority of this act? NO

Is applicant receiving, either directly or indirectly, any loan, credit, money, or the equivalent thereof from or through a subsidiary or affiliate or other licensee, or from any firm, association or corporation operating under or regulated by the authority of this act? NO

Contact Person

Home Phone:

**Business Phone:** 

Cell Phone:

Fax:

E-mail:

PREVIOUS LICENSE INFORMATION:

Previous License Number(s)

Trade Name:

License 1:

Applicant:

License 2:





ALCOHOL LICENSE APPLICATION

Confirmation Number: 20190206110654576

If applicant is leasing the property, is a copy of the lease agreement attached? YES

Name of Property owner/lessor and phone number: FOLEY HOLDINGS LLC 251-923-2111

What is lessors primary business? CONSTRUCTION/DEVELOPMENT

Is lessor involved in any way with the alcoholic beverage business? NO

Is there any further interest, or connection with, the licensee's business by the lessor? NO

Does the premise have a fully equipped kitchen? NO
Is the business used to habitually and principally provide food to the public? NO
Does the establishment have restroom facilities? YES
Is the premise equipped with services and facilities for on premises consumption of alcoholic beverages? YES

Will the business be operated primarily as a package store? NO

Building Dimensions Square Footage: 3750 Display Square Footage:

Building seating capacity: 75 Does Licensed premises include a patio area? NO

License Structure: ONE STORY
Location is within: CITY LIMITS

License covers: OTHER
Police protection: CITY

Has any person(s) with any interest, including manager, whether as sole applicant, officer, member, or partner been charged (whether convicted or not) of any law violation(s)?

Name:	Violation & Date:	Arresting Agency:	Disposition:
		<u>.</u>	





ALCOHOL LICENSE APPLICATION

**Confirmation Number: 20190206110654576** 

Initial each	l	Signature pa	ge		
LM	In reference to law violations,	I attest to the truthfulness of the	responses given within the application.		
LW	In reference to the Lease/property ownership, I attest to the truthfulness of the responses given within				
	the application.				
LM	In reference to ACT No. 80-5	29, I understand that if my applic	cation is denied or discontinued, I will not be		
r	refunded the filing fee require	d by this application.			
LM	In reference to Special Retail	or Special Events retail license,	l agree to comply with all applicable laws and		
	regulations concerning this cl within the application.	ass of license, and to observe th	e special terms and conditions as indicated		
LW	In reference to the Club Appl	cation information, I attest to the	truthfulness of the responses given		
	within the application.				
LW	In reference to the transfer of	license/location, I attest to the ti	ruthfulness of the information listed on the		
	attached transfer agreement.				
[ FM	In accordance with Alabama	Rules & Regulations 20-X-501	(4), any social security number disclosed		
	under this regulation shall be	used for the purpose of investig	ation or verification by the ABC Board		
	and shall not be a matter of p	ublic record.			
[ M	The undersigned agree, if a l	icense is issued as herein applie	d for, to comply at all times with and to fully		
			Control Act, as appears in Code of Alabama,		
		tate of Alabama relative to the h			
	<del>-</del> .	• •	ther agrees to obey all rules and regulations		
		<del>-</del>	eceived in this State. The undersigned,		
			and hereby invites duly authorized agents of		
		-	commissioned law enforcement officer of es are located to enter and search without		
	·	·	supled by him or her in connection with		
			is that he or she violate any provisions of the		
			ocation and no license can be again issued		
			rther understands and agrees that no changes		
	•		of any services or facilities as described in this		
			per governing body and the Alabama		
	Alcoholic Beverage Control E		goroning coe, and are massing		
LM	-		d all statements therein and facts set forth are true		
	•		ed in the business for which the license		
	is required.	, , , , , , , , , , , , , , , , , , ,			
Applicant N	lame (print):				
Signature c	of Applicant:				
Notary Nan	ne (print):				
Notary Sigr	nature:		Commission expires:		
Application	Taken: An	p. Inv. Completed:	Forwarded to District Office:		
	to Local Government:	L. marin a annula manana	Received from Local Government:		
		Reviewed by Supervisor:			





Confirmation Number: 20190206110654576



### Private Clubs / Special Retail / or Special Events licenses ONLY

#### **Private Club**

Does the club charge and collect dues from elected members? Number of paid up members: Are meetings regularly held? How often?

Is business conducted through officers regularly elected? Are members admitted by written application, investigation, and ballot? Has Agent verified membership applications for each member listed? Has at least 10% of members listed been confirmed and highlighted? For what purpose is the club organized?

Agent's Initials:

Does the property used, as well as the advantages, belong to all the members? Do the operations of the club benefit any individual member(s), officer(s), director(s), agent(s), or employee(s) of the club rather than to benefit of the entire membership?

#### Special Retail

Is it for 30 days or less? More than 30 days?

Franchisee or Concessionaire of above? Other valid responsible organization: Explanation:

Special Events / Special Retail (7 days or less) Starting Date: 03/14/2019 Ending Date: 03/14/2019

Special terms and conditions for special event/special retail:

EVENT WILL BE HELD THURSDAY, MARCH 14, 2019. LICENSED AREA WILL BE BARRICADED TO CONTROL ENTRANCE/EXIT. BEER WILL BE SOLD IN 9 OUNCE CUPS AND WINE IN 6 OUNCE CUPS. NO ALCOHOLIC BEVERAGES ARE ALLOWED TO LEAVE THE LICENSED AREA. THIS IS A NON-RENEWABLE LICENSE.

#### Other Explanations

License Covers: TENT

#### **Receipt Confirmation Page**

### Receipt Confirmation Number: 20190206110654576

Application Payment Confirmation Number: 40952574

Payment Summary	
Payment Item	Fee
Application Fee for License 140	\$50.00
Total Amount to be Charg	ged \$50,00

#### License Payment Confirmation Number:

Payment Sum	mary		
Payment Item	County Fee	State Fee	Total Fee
140 - SPECIAL EVENTS RETAIL	\$212.00	\$150.00	\$362.00
			\$0.00
Total Amount to be Charged	\$212.00	\$150.00	\$362.00

**Application Type** 

Application Type: APPLICATION

**Applicant Information** 

License Type 1: 140 - SPECIAL EVENTS RETAIL

License Type 2:

License County: BALDWIN

Business Type: LLC

Trade Name: YOUNG PROFESSIONALS
Applicant Name: THE PARK AT OWA LLC

Location Address: PUBLIC AREA BEHIND FOUNTAIN ACROSS FROM SUITE 101A

FOLEY, AL 36535

Mailing Address: 1501 SOUTH OWA BLVD

FOLEY, AL 36535

Contact Person:

Contact Home Phone:

Contact Business Phone:

Contact Fax:

Contact Cell Phone:

Contact Email Address:

Contact Web Address: