



STATE OF ALABAMA
ALCOHOLIC BEVERAGE CONTROL BOARD
ALCOHOL LICENSE APPLICATION



Confirmation Number: 20241108154919205

If applicant is leasing the property, is a copy of the lease agreement attached? **YES**
 Name of Property owner/lessor and phone number: **DIP PROPERTIES LLC 251-605-4998**
 What is lessors primary business? **REAL ESTATE**
 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? **YES**
 Is the business used to habitually and principally provide food to the public? **YES**
 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: **1700** Display Square Footage:
 Building seating capacity: **75** Does Licensed premises include a patio area? **NO**
 License Structure: **SINGLE STRUCTURE** License covers: **PORTION OF**
 Number of licenses in the vicinity: **0** Nearest: **0**
 Nearest school: Nearest church: Nearest residence: **0 blocks**
 Location is within: **CITY LIMITS** 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)? **NO**

Name:	Violation & Date:	Arresting Agency:	Disposition:



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Initial each

Signature page

R

In reference to law violations, I attest to the truthfulness of the responses given within the application.

R

In reference to the Lease/property ownership, I attest to the truthfulness of the responses given within the application.

R

In reference to ACT No. 80-529, I understand that if my application is denied or discontinued, I will not be refunded the filing fee required by this application.

R

In reference to Special Retail or Special Events retail license, Wine Festival and Wine Festival Participant Licenses, and Food or Beverage Truck Licenses, I agree to comply with all applicable laws and regulations concerning this class of license, and to observe the special terms and conditions as indicated within the application.

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In reference to the Club Application information, I attest to the truthfulness of the responses given within the application.

R

In reference to the transfer of license/location, I attest to the truthfulness of the information listed on the attached transfer agreement.

R

In accordance with Alabama Rules & Regulations 20-X-5-.01(4), any social security number disclosed under this regulation shall be used for the purpose of investigation or verification by the ABC Board and shall not be a matter of public record.

R

The undersigned agree, if a license is issued as herein applied for, to comply at all times with and to fully observe all the provisions of the Alabama Alcoholic Beverage Control Act, as appears in Code of Alabama, Title 28, and all laws of the State of Alabama relative to the handling of alcoholic beverages.

The undersigned, if issued a license as herein requested, further agrees to obey all rules and regulations promulgated by the board relative to all alcoholic beverages received in this State. The undersigned, if issued a license as herein requested, also agrees to allow and hereby invites duly authorized agents of the Alabama Alcoholic Beverage Control Board and any duly commissioned law enforcement officer of the State, County or Municipality in which the license premises are located to enter and search without a warrant the licensed premises or any building owned or occupied by him or her in connection with said licensed premises. The undersigned hereby understands that he or she violate any provisions of the aforementioned laws his or her license shall be subject to revocation and no license can be again issued to said licensee for a period of one year. The undersigned further understands and agrees that no changes in the manner of operation and no deletion or discontinuance of any services or facilities as described in this application will be allowed without written approval of the proper governing body and the Alabama Alcoholic Beverage Control Board.

R

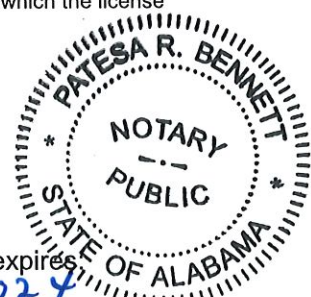
I hereby swear and affirm that I have read the application and all statements therein and facts set forth are true and correct, and that the applicant is the only person interested in the business for which the license is required.

Applicant Name (print): Roy Agredano Gonzalez

Signature of Applicant: [Signature]

Notary Name (print): Patesa Bennett

Notary Signature: [Signature]



Commission expires 12/18/2024

Application Taken: **App. Inv. Completed:**
Submitted to Local Government:
Received in District Office: **Reviewed by Supervisor:**

Forwarded to District Office:
Received from Local Government:
Forwarded to Central Office:

Receipt Confirmation Page

Receipt Confirmation Number: **20241108154919205**
Application Payment Confirmation Number: 104969976

Payment Summary	
Payment Item	Fee
Application Fee for License 020	\$50.00
Total Amount to be Charged	\$50.00

License Payment Confirmation Number:

Payment Summary			
Payment Item	County Fee	State Fee	Total Fee
020 - RESTAURANT RETAIL LIQUOR	\$440.00	\$300.00	\$740.00
			\$0.00
Total Amount to be Charged	\$440.00	\$300.00	\$740.00

Application Type

Application Type: APPLICATION

Applicant Information

License Type 1: 020 - RESTAURANT RETAIL LIQUOR
License Type 2:
License County: BALDWIN
Business Type: LLC
Trade Name: **EL MEZQUITE MEXICAN GRILL CO**
Applicant Name: **EL MEZQUITE MEXICAN GRILL LLC**
Location Address: 3820 S MCKENZIE ST
FOLEY, AL 36535

Mailing Address: 3820 S MCKENZIE ST
FOLEY, AL 36535

Contact Person: RAUL AGREDANO GONZALEZ
Contact Home Phone: 251-424-2083
Contact Business Phone: 251-388-7692
Contact Fax:
Contact Cell Phone:
Contact Email Address:
Contact Web Address:

Cordell, Dorothy

From: Cordell, Dorothy
Sent: Friday, November 8, 2024 4:16 PM
To: raul6666999@gmail.com
Subject: POC for City of Foley - Katy Taylor

Importance: High

Raul,
Your POC for the City of Foley is Katy Taylor, City Clerk:

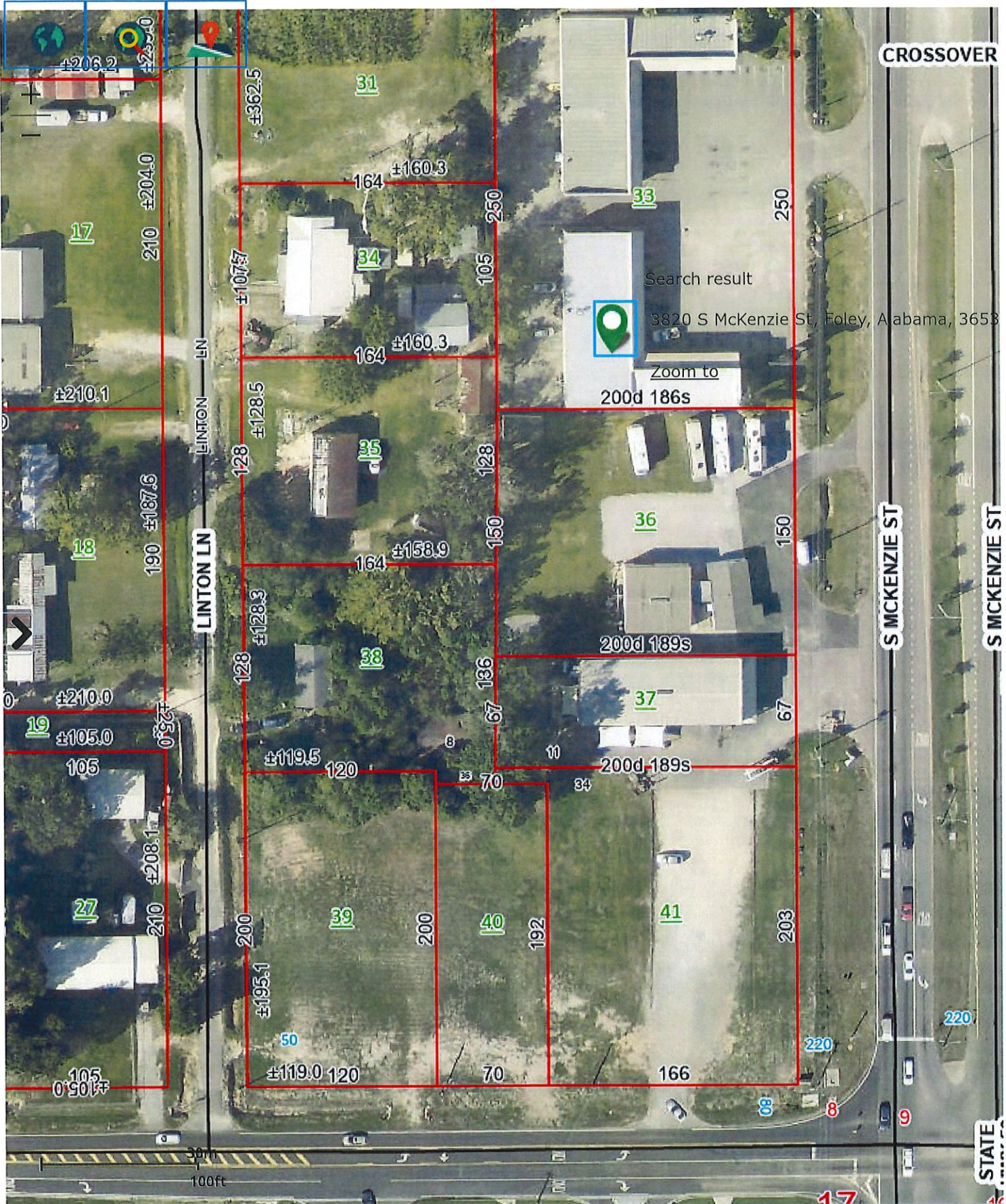
Kathryn Taylor, MMC || City Clerk || City of Foley
407 East Laurel Avenue Foley, Alabama 36535 ||
251.943.1545 || ktaylor@cityoffoley.org

Please take application to Katy: she'll place it on Foley's agenda so that it can be voted on.

Thank you,
Dorothy Cordell
Administrative Support Assistant II
Alabama Alcoholic Beverage Control Board
Licensing and Compliance
20210 Highway 59, Suite 5
Summerdale, AL 36580
Office: 251-240-3005
Website: <http://alabcboard.gov>

Baldwin County Parcel Viewer

3820 S McKenzie St. Foley, AL X



Search result
 3820 S McKenzie St, Foley, Alabama, 36530

Zoom to
 200d 186s

