

STATE OF ALABAMA ALCOHOLIC BEVERAGE CONTROL BOARD



ALCOHOL LICENSE APPLICATION Confirmation Number: 20180827101741315

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Evpe License: 010 -	I OUNGE RETAIL	LIQUOR - CLASS I

State: \$300.00 County: \$400.00

Type License:

State:

County:

Trade Name: OUR PLACE AND SPORTS BAR

Filing Fee: \$50.00

Applicant: OUR PLACE AND SPORTS BAR LLC

Transfer Fee:

Location Address: 1157 SOUTH MCKENZIE STREET

FOLEY, AL 36535

Mailing Address:

County: BALDWIN Tobacco sales: NO

Tobacco Vending Machines:

Type Ownership: LLC

Book, Page, or Document info: INST 524-476

Date Incorporated: 07/23/2018 State incorporated: AL

County Incorporated: BALDWIN

Date of Authority: 07/23/2018

Alabama State Sales Tax ID: R01008207

Federal Tax ID: 83-1299060

Name:	Title:	Date and Place of Birth:	Residence Address:
1			,

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:

Business Phone:

Home Phone:

Cell Phone: E-mail:

Fax:

Previous License Number(s)

Trade Name:

PREVIOUS LICENSE INFORMATION:

Applicant:

License 1:

License 2:



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If applicant is leasing the property, is a copy of the lease agreement attached? YES Name of Property owner/lessor and phone number: LINH PHO 251-298-0467 What is lessors primary business? PROPERTY MANAGEMENT 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: 4000

Display Square Footage:

Building seating capacity: 220

Does Licensed premises include a patio area? NO

License Structure: SINGLE STRUCTURE License covers: ENTIRE STRUCTURE

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)?

Name:	Violation & Date:	Arresting Agency:	Disposition:
		-	
		A CONTRACTOR OF	······
		· ·	



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initial each	1	Signature I	oage	
Mhe	In reference to law violatio	ns, I attest to the truthfulness of I	he responses given within the application.	
mhe	In reference to the Lease/property ownership, I attest to the truthfulness of the responses given within			
	the application.			
Mue	In reference to ACT No. 8	0-529, I understand that if my app	olication is denied or discontinued, I will not be	
	refunded the filing fee requ	uired by this application.		
MUC	In reference to Special Re	tail or Special Events retail licens	e, I agree to comply with all applicable laws and	
	regulations concerning this	s class of license, and to observe	the special terms and conditions as indicated	
	within the application.	·	·	
MKC	, ,	oplication information, I attest to	he truthfulness of the responses given	
	within the application.	•	• •	
Muc	1	r of license/location, I attest to the	e truthfulness of the information listed on the	
***************************************	attached transfer agreeme			
Muc	•		01(4), any social security number disclosed	
	•	•	tigation or verification by the ABC Board	
	and shall not be a matter	, ,	,	
Mke				
	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	l a license as herein requested, f	urther agrees to obey all rules and regulations	
	promulgated by the board	relative to all alcoholic beverage	s received in this State. The undersigned,	
	if issued a license as here	in requested, also agrees to allov	w and hereby invites duly authorized agents of	
	the Alabama Alcoholic Be	verage Control Board and any du	ly commissioned law enforcement officer of	
	the State, County or Muni	cipality in which the license prem	ises are located to enter and search without	
	a warrant the licensed pre	mises or any building owned or o	occupied by him or her in connection with	
	said licensed premises. T	he undersigned hereby understa	nds that he or she violate any provisions of the	
	aforementioned laws his o	r her license shall be subject to r	evocation and no license can be again issued	
	to said licensee for a perio	d of one year. The undersigned	further understands and agrees that no changes	
	in the manner of operation	ı and no deletion or discontinuan	ce of any services or facilities as described in this	
	• •	• • • • • • • • • • • • • • • • • • • •	roper governing body and the Alabama	
	Alcoholic Beverage Contro			
MHL			and all statements therein and facts set forth are true	
	•	applicant is the only person intere	sted in the business for which the license	
A 1; b	is required.			
Applicant N	lame (print):			
Signature d	of Applicant:			
Oignature	n r pphoant.			
Notary Nar	ne (print):	•		
Notary Sig	nature:		Commission expires: 08/24/2020	
Application	Taken:	App. Inv. Completed:	Forwarded to District Office:	
	to Local Government		Received from Local Government:	
	District Office:	Reviewed by Superviso	r: Forwarded to Central Office:	

Receipt Confirmation Page

Receipt Confirmation Number: 20180827101741315

Application Payment Confirmation Number: 37618456

Payment	Summary	
Payment Item		Fee
Application Fee for License 010		\$50.00
	Total Amount to be Charged	\$50.00

License Payment Confirmation Number:

Payment Summary			
Payment Item	County Fee	State Fee	Total Fee
010 - LOUNGE RETAIL LIQUOR - CLASS I	\$400.00	\$300.00	\$700.00
			\$0.00
Total Amount to be Charged	\$400.00	\$300.00	\$700.00

Application Type

Application Type: APPLICATION

Applicant Information

License Type 1: 010 - LOUNGE RETAIL LIQUOR - CLASS I

License Type 2:

License County: BALDWIN

Business Type: LLC

Trade Name: OUR PLACE AND SPORTS BAR
Applicant Name: OUR PLACE AND SPORTS BAR LLC
Location Address: 1157 SOUTH MCKENZIE STREET

FOLEY, AL 36535

Mailing Address:

Contact Person:

Contact Home Phone:

Contact Business Phone:

Contact Fax:

Contact Cell Phone:

Contact Email Address:

Contact Web Address:

Application Payment Receipt Confirmation Page

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Application Payment Confirmation Number: 37618456

Payment Summary		
Payment Item	Fee	
Application Fee for License 010	\$50,00	
Total Amount to be Charged	\$50.00	

Application Information

Application Type: APPLICATION

License Type 1: 010 - LOUNGE RETAIL LIQUOR - CLASS I

Continue

Technical Support: 866-353-3468 or support@alabamainteractive.org

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