

CITY OF DESOTO ALCOHOL PERMIT APPLICATION PROCEDURES AND INFORMATION

In order to provide certification of your TABC paperwork, you must follow this process:

- Complete a City of DeSoto Alcoholic Beverage Permit Application along with \$30 fee.
 - A map of the proposed location will be provided by the Planning Department along with a spreadsheet, on which the applicant will note the businesses/schools/churches/hospitals surrounding the location.
 - Return this documentation to the Planning Department.
 - Once this information has been received, distance requirements will be verified.
- The City will notify applicant of the outcome of the distance requirement verification. If distance requirement is not met, the process ends.
- If application is for a Beer and Wine Sales Establishment (75% or more revenue is generated from beer/wine sales), a Specific Use Permit (SUP) is required. Submit SUP application along with all required paperwork and fees to the Planning Department. If SUP is denied, process ends.
- If distance requirement is met and SUP has been approved (if required), applicant will submit completed TABC pre-qualification paperwork for certification by the City Secretary. Paperwork must be certified by the Comptroller of Public Accounts. The City of DeSoto will not accept an application that does not meet this requirement. **NO ORIGINAL TABC PRE-QUALIFICATION PAPERWORK WILL BE ACCEPTED PRIOR TO THIS STEP.** A copy may be submitted for informational purposes.

Fees have been assessed at ½ the annual TABC fees, and are due annually for BQ licenses upon the renewal of any TABC permit or license; RM licenses are due annually after 36 months of initial licensing. The \$30 fee collected upon initial application will be applied to the City's TABC portion.

If you should have any questions, please feel free to contact:

Office of the City Secretary	972-230-9646
Planning Department	972-230-9622

CITY OF DESOTO
ALCOHOLIC BEVERAGE PERMIT APPLICATION

- RM PERMIT (MIXED BEVERAGE PERMIT WITH FB)
- BG PERMIT (WINE AND BEER RETAILER'S PERMIT WITH FB)
- BQ PERMIT (WINE AND BEER RETAILER'S OFF-PREMISE)

- SALES OF BEER AND WINE WILL CONSTITUTE MORE THAN 75% OF LOCATION'S REVENUE. (SUP required – see Planning Department for requirements)

PLEASE PRINT OR TYPE THE FOLLOWING:

APPLICANT NAME: _____

NAME OF ESTABLISHMENT: _____

CONTACT NAME : _____

CONTACT TELEPHONE NUMBER: _____

CONTACT E-MAIL: _____

SIGNATURE: _____

I hereby certify that I completed the Land Use Survey that denotes the uses that exist within 300 feet of the store located at _____. Furthermore, I certify that the uses listed were identified in the field and correctly listed. I also certify that there are no churches, public or private schools (100 plus students enrolled for a private school), or public hospitals within 300 feet of the address denoted above. Finally, I certify that I received the requirements regarding how the distance should be measured for each use listed above.

Name of person who completed the Land Use Survey (please print) _____

Signature of person who completed the Land Use Survey _____

FOR CITY USE ONLY

DEVELOPMENT SERVICES DEPARTMENT REVIEW

Is the property properly zoned for the above requested permit?

Yes No

Zoning Designation: _____

DISTANCE REQUIREMENTS:

The requested permit appears to be located within:

300 feet of a Church Yes No
300 feet of a Public Hospital Yes No
300 feet of a Public School Yes No

Does the Application Meet Permit Requirements:

Yes No

Signed by: _____ **Date:** _____

Comments: _____

OFFICE OF CITY SECRETARY

APPLICATION FEE AMOUNT/DATE : _____

DEPOSIT: 101-43150-000-000

IF REQUIRED, SUP#: _____

DATE APPROVED: _____

TABC FEE/CITY COLLECTION PORTION (AMOUNT/DATE):_____