Office of Alcoholic Beverage Control
City of Baton Rouge/Parish of East Baton Rouge
9048 Airline Hwy.
Baton Rouge, LA 70815
Telephone (225) 389-3364; Fax (225) 389-7869

NOTICE
Payment should be made in the form of cash, cashier's check or money order, made payable to the City & Parish Treasurer.

FEE: $105.00

Application
Class R (Restaurant)

(OFFICE USE ONLY

_____New; _____ Renewal; _____ Inside; _____ Outside Baton Rouge City Limits; Date:_____

_____ A current copy of the restaurant menu filed with this application. Account #_____

1. Trade Name of Business, Business Phone & Cell Number: ( ) ( )	2.Business Owner (Name of Individual, Partnership, Corporation, LLC
3. Business Address (Street, Zip Code):	4. Mailing Address (P.O. Box/Street/City/State/Zip Code):

5. Does this business currently hold a Class A Beer and/or Liquor license for the current year at this location? _____ Yes; _____ No

6. Is the primary purpose of this business operation to prepare and serve meals and meal items for consumption to the general public?
_____ Yes; _____ No.

7. Is food served on all days of operation? _____ Yes; _____ No.

8. Does the applicant operate a bona fide restaurant by having a fully equipped kitchen facility and dining room manned and operated at all times that alcoholic beverages are sold on Sunday? _____ Yes; _____ No.

9. Does the business have at least 60 days of prior business experience? _____ Yes; _____ No. If "Yes", does this business gross at least 51% of its monthly revenue from the sale of food, food items and non-alcoholic beverages? _____ Yes; _____ No.

This affidavit must be executed by the applicant before a Notary Public.

I swear (or affirm) that I have read each of the questions in this application and the answers which I have given are true and correct to the best of my knowledge. I understand that any false statement or misrepresentation of fact constitutes grounds for denial of this application. By signing this application, the holder of any license issued to the applicant agrees to waive all formalities regarding search and seizure during the duration of the license. Furthermore, the holder of the license agrees to waive the same formalities if the license is revoked or if the holder is ordered by a court of competent jurisdiction to remove all alcohol, for as long as the holder owns or rents the previously licensed premises.

Signature_____ Title_____

Printed Name_____

Sworn to and subscribed before me this _____ day of _____ 20_____

Notary Public's Signature_____ Print name of Notary Public_____