



## ALCOHOLIC BEVERAGE ESTABLISHMENT STATE LICENSING

SEMINOLE COUNTY PLANNING & DEVELOPMENT DIVISION RM 2028  
1101 East First Street Sanford FL 32771 (407) 665-7441

Name: \_\_\_\_\_

Name of establishment: \_\_\_\_\_

Address of establishment: \_\_\_\_\_ City: \_\_\_\_\_ Zip code: \_\_\_\_\_

Phone number of establishment: \_\_\_\_\_

Email address: \_\_\_\_\_

Is the property available for inspection without an appointment?  Yes  No

What is the current use of the property? \_\_\_\_\_

**What is this request for? check all that apply:**

[ ] **Incidental Sales**, ex: convenience or grocery store where alcohol sales do not exceed 10% of net floor area.

*Provide a floor plan showing the overall square footage and **the area of alcohol sales.***

[ ] License Renewal

[ ] License Update (*corporate identity changes*):

Old license number: \_\_\_\_\_

Previous Name: \_\_\_\_\_

New Name: \_\_\_\_\_

[ ] New License

[ ] **License type:** \_\_\_\_\_

**REQUIRED ATTACHMENTS:**

[ ] *DBPR State License Form*

**Signed:** \_\_\_\_\_

**FOR OFFICE USE ONLY**

Date Submitted: _____	Reviewed By: _____
Tax parcel number: _____	
Zoning/FLU _____	
Notes: _____	