

**APPLICATION FOR CERTIFICATE OF USE FOR LIQUOR / BEER AND/OR WINE****NEW BUSINESS INFORMATION****BUSINESS ADDRESS** *(List all Addresses)*

CITY

STATE

ZIP

UNIT/SUITE

**MAILING ADDRESS** *(List all Addresses)*

CITY

STATE

ZIP

UNIT/SUITE

NAME CORPORATION

NAME OF BUSINESS / DBA *(doing business as)***CORPORATE OFFICER / BUSINESS OWNER**

FIRST NAME

LAST NAME

BUSINESS PHONE NUMBER

E-MAIL

**LOCATION INFORMATION**SIZE OF SPACE *(Sqft)*

ALCOHOL TYPE(S)

☐ Liquor ☐ Wine ☐ Beer

BUILDING TYPE

☐ Grocery Store ☐ Bar ☐ Package Store ☐ Cabaret ☐ Restaurant ☐ Lounge ☐ Night Club ☐ Other (Explain)Will you be sharing space with another business? ☐ Yes ☐ No

COMMENTS

Will used merchandise be sold on the property? ☐ Yes ☐ No

COMMENTS

DESCRIBE THE TYPE OF BUSINESS

LAND USE

Further, under the penalty of perjury, I, being first duly sworn, depose and say that I have read the foregoing application and that the facts stated herein are accurate and true, including any boxes checked. I further acknowledge that this application and affidavit is subject to penalties of perjury, and acknowledge that Miami-Dade County reserves the right to revoke, cancel, void, or suspend, any permit issued pursuant to any application that contains any materially false or fraudulent statements, and acknowledge that continued operation of the uses after the permit is revoked, canceled, voided, or suspended, may subject me to enforcement penalties allowed by law.

I understand the conditions under which my Certificate of Use (CU) is being approved and accept that no changes or refunds can be made once issued. I further understand that a Certificate of Occupancy (CO) is a prerequisite to obtaining a Certificate of Use

PRINT NAME

SIGNATURE

**DEPARTMENT USE ONLY: DO NOT WRITE BELOW THIS LINE**

ZONING

PROCESSOR

CONDITIONS UNDER WHICH APPROVED

RESOLUTIONS

PROCESS NUMBER *(Begins with letter "U")*