



# APPLICATION FOR NEW OR TRANSFER PERMIT – RETAILER OR DEALER

State Form 51189 (R11 / 6-26)

### INSTRUCTIONS:

1. Type or print legibly.
2. Include payment.
3. Do not complete shaded areas.
4. If there is no opening for this applied permit or there is an omission, this application will be returned.
5. Please attach a completed Property Tax Clearance – Form 1 (State Form 1462), if applicable.
6. Please attach a completed County Verification of Business Location form (State Form 44184), if applicable.
7. Certificate of Existence from the Indiana Secretary of State, excluding partnership and sole proprietors.
8. For transfers of ownership and transfers of ownership and location, attach Consent to Transfer (State Form 49930) and Affidavit of Purchase Price (State Form 56812).
9. Please attach additional documentation as indicated throughout the application.
10. For a list of permit fees, please visit [www.in.gov/atc/files/Complete-ATC-Fee-Schedule.pdf](http://www.in.gov/atc/files/Complete-ATC-Fee-Schedule.pdf).
11. To apply online, please visit [www.in.gov/atc/alcohol-permit-resources/alcohol-permit-applications-and-forms/](http://www.in.gov/atc/alcohol-permit-resources/alcohol-permit-applications-and-forms/).

\* This agency is requesting your Social Security Number in accordance with IC 4-1-8-1.  
Disclosure is mandatory, and this record cannot be processed without it.

| FOR OFFICE USE ONLY        |  |
|----------------------------|--|
| Date received (mm/dd/yyyy) |  |
| Permit number              |  |
| Permit type                |  |
| Base fee receipt number    |  |
| Catering receipt number    |  |
| Processor                  |  |
| Jurisdiction               |  |

### SECTION 1: GENERAL INFORMATION

|   |   |  |
|---|---|--|
| 1.1. Application type:  |   |  |
| <input type="checkbox"/> New  | <input type="checkbox"/> Transfer of location (\$250 fee)               |  |
| <input type="checkbox"/> Transfer of ownership (\$250 fee)  | <input type="checkbox"/> Transfer of ownership and location (\$500 fee) |  |
| 1.2. Permit type for which you are applying:  |   |  |
| 1.3. Please briefly describe how the applicant qualifies for this permit type:  |   | 1.4. Permit number ( <i>Transfers only</i> )             |
| 1.5. Name of applicant ( <i>individual or business entity</i> )   |   |  |
| 1.6. Doing business as ( <i>d/b/a</i> )   |   |  |
| 1.7. The applicant is a: ( <i>Check one</i> )   |   |  |
| <input type="checkbox"/> Sole Owner   | <input type="checkbox"/> Limited Partnership                            | <input type="checkbox"/> Government Entity               |
| <input type="checkbox"/> Club Association   | <input type="checkbox"/> Corporation                                    | <input type="checkbox"/> Limited Liability Company       |
| <input type="checkbox"/> Simple Partnership   | <input type="checkbox"/> Limited Liability Partnership                  | <input type="checkbox"/> Club Corporation                |
| 1.8. Premises address <input type="checkbox"/> Location pending   |   |  |
| Street name and number  |   | Suite number ( <i>if applicable</i> )                    |
| City / Town   | State   | ZIP code   |
| E-mail address  |   | Telephone number of premises                             |
| 1.9. Mailing address <input type="checkbox"/> Same as above   |   |  |
| <b>NOTE: Notices from the ATC will be sent to the mailing address and/or e-mail address provided this form. It is your responsibility to notify the ATC of any change in mailing address.</b> |   |  |
| Street name and number  |   |  |
| City / Town   | State   | ZIP code   |
| E-mail address  |   | Telephone number of applicant                            |
| 1.10. What county is the proposed permit premises located in?   |   |  |
| 1.11. Is the proposed permit premises located inside the corporate limits of a city / town?   |   | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 1.12. If yes, please name the incorporated city / town.   |   |  |

|   |  |
|---|--|
| 1.13. Is there at least 200 feet between the proposed permit premises and any church or school?   | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <p>If no, please check the exception that applies:</p> <p><input type="checkbox"/> Church or school has provided a written statement pursuant to IC 7.1-3-21-11, and the applicant is applying for a grocery store, drug store, restaurant, hotel, or catering hall permit. <i>(Must attach a copy of written statement(s) from church and/or school to application.)</i></p> <p><input type="checkbox"/> Wall of the proposed premises and wall of the church and/or school are separated by at least eighty-five (85) feet, including a two-lane road of at least thirty (30) feet in width.</p> <p><input type="checkbox"/> The applicant is applying for a retail restaurant permit located in a facility on the National Register of Historic Places. <i>(Must include documentation of the historic designation.)</i></p> <p><input type="checkbox"/> The applicant is applying for a retail restaurant permit located within the boundaries of an historic district established in accordance with IC 36-7-11-7. <i>(Must include documentation of the historic designation and a map of the historic district which indicates the location of the proposed permit premises within the historic district.)</i></p> <p><input type="checkbox"/> The applicant is applying for one of the following permit types:</p> <p style="margin-left: 20px;">a) Mall (IC 7.1-3-20-24.4);</p> <p style="margin-left: 20px;">b) City market (IC 7.1-3-20-25);</p> <p style="margin-left: 20px;">c) Historic railway station (IC 7.1-3-20-16(e)(1));</p> <p style="margin-left: 20px;">d) Renovation (IC 7.1-3-20-16(e)(2)); or</p> <p style="margin-left: 20px;">e) Food hall master (IC 7.1-3-20-29) or food hall vendor (IC 7.1-3-20-30).</p> <p><input type="checkbox"/> An alcoholic beverage permit premises has continuously operated at the location since prior to the opening of the church and/or school.</p> |  |
| 1.14. Do any individuals, corporations, limited liability companies, limited liability partnerships, or stock owners, members, or partners of any such entities have any interest, either directly or indirectly, in any distiller, vintner, farm winery, rectifier, brewer, primary source of supply, or wholesaler permit?  | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 1.15. If issued a permit, will you manage the licensed premises?<br><i>If no, please complete Section 7, Manager's Questionnaire.</i>   | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 1.16. Do you sell tobacco products? <i>If yes, please provide the Tobacco Sales Certificate number.</i>   | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 1.17. Do you consent for the duration of the permit to inspection and search by an enforcement officer, without a warrant or other process, of your licensed premises and vehicles to determine compliance with the provisions of Indiana Code 7.1? <i>Answering "No" to this question will result in the denial of this application.</i>   | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 1.18. Do you have a legal right to possess the permit premises for the term of the permit (ownership or a bona fide lease)?   | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <b>SECTION 2: QUALIFICATIONS</b>  |  |
| <p><b>THE FOLLOWING QUESTIONS PERTAIN TO ALL INDIVIDUALS WITH AN INTEREST IN THE PERMIT BEING APPLIED FOR.</b></p> <p>NOTE: "Individuals" referred to in all questions in the below section include limited liability companies (LLCs), limited liability partnerships (LLPs), corporations, partnerships, and all other business entities recognized under Indiana law, as well as a natural person where applicable.</p>  |  |
| 2.1. Do all individuals with an interest in this application have lawful status in the United States as defined by IC 9-13-2-92.3?  | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 2.2. Are all individuals with an interest in this application of sound mind and good repute in the community in which they reside?  | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 2.3. Have any individuals with an interest in this permit been convicted of a felony or a misdemeanor?<br><i>(If yes, please attach a letter with conviction, court, date, and sentence information.)</i>   | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 2.4. Have any individuals with an interest in this application ever been convicted of and/or found to have committed a violation of the Indiana Alcoholic Beverage laws, rules, regulations, or orders of the ATC? <i>(If yes, please attach a letter detailing the conviction and/or violation, including permit number.)</i>  | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 2.5. Are any individuals with an interest in this application a law enforcement officer, a non-elected officer of a municipal corporation or government subdivision, or an officer of the state of Indiana, charged with any duty or function in the enforcement of Title 7.1 of the Indiana Code?  | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 2.6. Have any individuals with an interest in this application held a permit under Title 7.1 of the Indiana Code and had the permit revoked within one (1) year prior to the date of this application? <i>(If yes, please provide the permit number(s) and an explanation.)</i>   | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 2.7. Have any individuals with an interest in this application made an application for an alcoholic beverage permit of any type which was denied less than one (1) year prior to this application for a permit (unless the application was denied by reason of a procedural or technical defect)?   | <input type="checkbox"/> Yes <input type="checkbox"/> No |

|   |  |
|---|--|
| <b>2.8.</b> Do any individuals, corporations, limited liability companies, limited liability partnerships, partnerships, or stock owners, members, or partners of such entities have any interest, either directly or indirectly, in any other permits or registrations of any kind issued under Title 7.1 of the Indiana Code connected with, but not limited to, the production, distribution, transportation, or sale of alcoholic beverages? <i>If yes, list permits below. (Attach additional sheet if necessary.)</i> | <input type="checkbox"/> Yes <input type="checkbox"/> No |
|---|--|

|                  |
|------------------|
| Permit number(s) |
|------------------|

|  |  |
|--|--|
| <b>2.9.</b> Are you indebted to a person (or an officer or agent of that person) who holds a brewer's permit or wholesale permit, for a debt secured by a lien, mortgage, or otherwise, upon the premises for which the beer retailers permit is to be applicable or upon any of the property or fixtures on the premises or used in connection with the premises? | <input type="checkbox"/> Yes <input type="checkbox"/> No |
|--|--|

**SECTION 3: OWNERSHIP INFORMATION**

IC 7.1-3-21-8 requires the disclosure of each person or entity that holds (directly or indirectly) at least a five percent (5%) interest in the permit and operating control or authority over the business conducted under it. When disclosing a publicly traded corporation, please provide the name and address of the corporate officers and members of the board of directors.

|  |                          |                            |  |
|--|--------------------------|----------------------------|--|
| <b>3.1.</b> Complete name  | Social Security number * | Date of birth (mm/dd/yyyy) | Lawful Status in United States<br><input type="checkbox"/> Yes <input type="checkbox"/> No |
| Address (number and street, city, state, and ZIP code)   |                          | Title                      |  |
| <input type="checkbox"/> Sole Owner <input type="checkbox"/> Stockholder <input type="checkbox"/> Partner <input type="checkbox"/> Member <input type="checkbox"/> Club Officer <input type="checkbox"/> Corporate Officer |                          |                            | Ownership percent (%)  |

|  |                          |                            |  |
|--|--------------------------|----------------------------|--|
| <b>3.2.</b> Complete name  | Social Security number * | Date of birth (mm/dd/yyyy) | Lawful Status in United States<br><input type="checkbox"/> Yes <input type="checkbox"/> No |
| Address (number and street, city, state, and ZIP code)   |                          | Title                      |  |
| <input type="checkbox"/> Sole Owner <input type="checkbox"/> Stockholder <input type="checkbox"/> Partner <input type="checkbox"/> Member <input type="checkbox"/> Club Officer <input type="checkbox"/> Corporate Officer |                          |                            | Ownership percent (%)  |

|  |                          |                            |  |
|--|--------------------------|----------------------------|--|
| <b>3.3.</b> Complete name  | Social Security number * | Date of birth (mm/dd/yyyy) | Lawful Status in United States<br><input type="checkbox"/> Yes <input type="checkbox"/> No |
| Address (number and street, city, state, and ZIP code)   |                          | Title                      |  |
| <input type="checkbox"/> Sole Owner <input type="checkbox"/> Stockholder <input type="checkbox"/> Partner <input type="checkbox"/> Member <input type="checkbox"/> Club Officer <input type="checkbox"/> Corporate Officer |                          |                            | Ownership percent (%)  |

|  |                          |                            |  |
|--|--------------------------|----------------------------|--|
| <b>3.4.</b> Complete name  | Social Security number * | Date of birth (mm/dd/yyyy) | Lawful Status in United States<br><input type="checkbox"/> Yes <input type="checkbox"/> No |
| Address (number and street, city, state, and ZIP code)   |                          | Title                      |  |
| <input type="checkbox"/> Sole Owner <input type="checkbox"/> Stockholder <input type="checkbox"/> Partner <input type="checkbox"/> Member <input type="checkbox"/> Club Officer <input type="checkbox"/> Corporate Officer |                          |                            | Ownership percent (%)  |

|  |                          |                            |  |
|--|--------------------------|----------------------------|--|
| <b>3.5</b> Complete name   | Social Security number * | Date of birth (mm/dd/yyyy) | Lawful Status in United States<br><input type="checkbox"/> Yes <input type="checkbox"/> No |
| Address (number and street, city, state, and ZIP code)   |                          | Title                      |  |
| <input type="checkbox"/> Sole Owner <input type="checkbox"/> Stockholder <input type="checkbox"/> Partner <input type="checkbox"/> Member <input type="checkbox"/> Club Officer <input type="checkbox"/> Corporate Officer |                          |                            | Ownership percent (%)  |

|  |                          |                            |  |
|--|--------------------------|----------------------------|--|
| <b>3.6</b> Complete name   | Social Security number * | Date of birth (mm/dd/yyyy) | Lawful Status in United States<br><input type="checkbox"/> Yes <input type="checkbox"/> No |
| Address (number and street, city, state, and ZIP code)   |                          | Title                      |  |
| <input type="checkbox"/> Sole Owner <input type="checkbox"/> Stockholder <input type="checkbox"/> Partner <input type="checkbox"/> Member <input type="checkbox"/> Club Officer <input type="checkbox"/> Corporate Officer |                          |                            | Ownership percent (%)  |

|  |                          |                            |  |
|--|--------------------------|----------------------------|--|
| <b>3.7</b> Complete name   | Social Security number * | Date of birth (mm/dd/yyyy) | Lawful Status in United States<br><input type="checkbox"/> Yes <input type="checkbox"/> No |
| Address (number and street, city, state, and ZIP code)   |                          | Title                      |  |
| <input type="checkbox"/> Sole Owner <input type="checkbox"/> Stockholder <input type="checkbox"/> Partner <input type="checkbox"/> Member <input type="checkbox"/> Club Officer <input type="checkbox"/> Corporate Officer |                          |                            | Ownership percent (%)  |

Check here if you have disclosed less than 100% of the permit ownership and the remaining undisclosed owners hold less than a 5% ownership interest.

**SECTION 4: ESCROW REQUEST**

The permit application and issuance process can take up to ninety (90) days or more, including application review, newspaper publication notice, orange sign posting, local alcoholic beverage board hearing, commission approval, and final floor plan approval by the Indiana State Excise Police. If your application is approved and you will not be immediately ready to open to the public upon issuance of the permit, the permit will need to be placed in escrow, (i.e., a non-operational status) pursuant to IC 7.1-3-1.1. All applicants must answer the following questions:

**4.1.1.** When will the permit premises for which you are applying be ready to open for business?

\_\_\_\_\_

*(mm/dd/yyyy)*

**4.1.2.** If you will not be ready to open to the public within ninety (90) days of permit issuance, please explain the steps you are taking to make the proposed permit operational and provide an estimated timeframe for when the permit will be operational. *(Please attach additional sheets as needed).*

**SECTION 5: RETAILER PERMIT QUESTIONS**

*(Skip to next section if you are not applying for a retailer permit.)*

**5.1. LIQUOR LIABILITY INSURANCE**

Retail permit holders, other than those completing *and* qualifying under the exception below, must maintain during the permit term a liquor liability insurance policy or a liquor liability endorsement to a general liability insurance policy. Evidence of compliant insurance coverage should include the legal entity name and address of the insured party where the permit is or will be issued, coverage amount, policy effective date, and policy expiration date. Acceptable evidence includes certificate of liability insurance, policy declaration page, or any other official documentation provided by the insurance provider containing the name of the insured, coverage amount, policy term, and statement that the policy includes liquor liability endorsement. Evidence of insurance coverage must originate from the insurance provider; an affidavit or other self-certified statement of compliance is not acceptable.

*(NOTE: For permits that are or will be deposited in escrow, proof of liquor liability insurance must be provided prior to the permit being made active.)*

**5.1.1.** Is the establishment operating at this location expected to have less than \$25,000 in gross sales from alcoholic beverages annually?

*If yes, you qualify for an exception to the liquor liability insurance requirement. If your gross sales of alcoholic beverages exceed \$25,000, you must obtain the required liquor liability insurance. If you answer no, you must attach proof of required liquor liability insurance.*

Yes  No

**5.2. MINORS**

**5.2.1.** Will minors be present on the permit premises?  
*(If no, skip to next applicable section.)*

Yes  No

**5.2.2.** Please select the exception below that allows minors on the permit premises: *(See IC 7.1-5-7-11 for additional information.)*

- |   |  |
|---|--|
| Civic center  | Convention center  |
| Sports arena  | Fraternal club (IC 7.1-3-20-7)   |
| Social club (IC 7.1-3-20-1)   | Boat   |
| Dining car  | Horse racetrack facility (IC 4-31-5)   |
| Satellite facility (IC 4-31-2-20.5)   | Private catering hall that is not open to the public (IC 7.1-3-20-24)  |
| Entertainment complex (IC 7.1-1-3-16.5)   | Indoor golf facility   |
| Automobile racetrack  | Licensed premises owned or operated by a postsecondary educational institution (IC 21-17-6-1)                                      |
| Indoor theater (IC 7.1-3-20-26)   | Food hall master permit (IC 7.1-3-20-29) or food hall vendor permit (IC 7.1-3-20-30)   |
| Senior residence facility campus (IC 7.1-3-1-29)  | A hotel (other than a part of the hotel that is in a room of a restaurant in which a bar <sup>1</sup> is located) (IC 7.1-3-20-18) |
| Recreational facility (i.e., a golf course, bowling center, or similar facility whose principal business is recreational activity and not the sale of food and beverages) | A restaurant with full separation** between the barroom and family dining room   |
| No alcoholic beverages are served across a bar <sup>1</sup> and service is accomplished by an employee  |  |

A restaurant with limited separation\*\*\* between the barroom and family dining room that is subject to the minimum food sales requirement set forth in 905 IAC 1-41-2.

A restaurant operated by the holder of an artisan distiller, small brewer, and/or farm winery permit with limited separation\*\*\* between the barroom and family dining room that is not subject to the minimum food sales requirement set forth in 905 IAC 1-41-2.

A restaurant that sells at least \$100,000 in food a calendar year (IC 7.1-5-7-11(a)(36))

<sup>1</sup> For purposes of this section, a "bar" refers to a counter over which alcoholic beverages are sold or dispensed by the drink to consumers. Full\*\* or limited\*\*\* separation is required for any bar located in a restaurant if minors are allowed on the restaurant premises and no applicable exception applies.

\*\* Full separation is a nontransparent wall at least seventy-two (72) inches in height with a doorway or open archway of no more than five (5) feet in width which separates the barroom and the family dining room.

\*\*\* Limited separation is a structure or barrier that reasonably deters free access and egress without requirement for doors or gates which separates the barroom and the family dining room. Under 905 IAC 1-41-2, in order to qualify for limited separation, a permittee or applicant must have minimum food sales or projected food sales of at least \$200,000 per year or 60% of gross food and alcoholic beverage sales (not including carryout or catering sales) must be in the sale of food.

**5.4. BEER, WINE, AND LIQUOR RETAILER RESTAURANT (209) IN UNINCORPORATED AREA**

5.4.1. If you are seeking a beer, wine, and liquor retailer permit in an unincorporated area (type 209 permit), do you project that annual gross food sales at the location will reach \$200,000 by the end of the first two (2) years and that annual gross food sales will be at least \$100,000 each year thereafter?  Yes  No

**5.5. LIQUOR RETAILER IN INCORPORATED AREA (Does not include beer only, wine only, or beer and wine retailers.)**

5.5.1. Is the proposed permit premises located in an incorporated city having a population of less than 5,000?  Yes  No

5.5.2. If the answer is yes, have you attached to the application the enabling ordinance from the city consenting to the issuance of liquor retailer's permits?  Yes  No

**5.6. CARRYOUT OF ALCOHOLIC BEVERAGES**

5.6.1. Do you wish to sell alcoholic beverages for carryout? (If yes, please attach State Form 56312, Carry-out Supplement.)  Yes  No

**5.7. CATERING HALL**

5.7.1. Are you applying for a catering hall permit to sell alcoholic beverages for consumption on the licensed premises with accommodations for at least 250 people which may only be used for private catered events?  Yes  No

**5.8. CLUBS**

5.8.1. If you are applying for a club permit, please select the appropriate club type:  Fraternal Club  Social Club

5.8.2. If a social club, does your association or organization meet the general requirements of IC 7.1-3-20-1?  Yes  No

5.8.3. If a fraternal club, does your association or corporation meet the general requirements of IC 7.1-3-20-1 and the specific requirements of IC 7.1-3-20-7?  Yes  No

5.8.4. If the club premises is outside corporate limits, do you meet the requirements of IC 7.1-3-20-3?  Yes  No

**5.9. HOTEL / RESORT HOTEL**

5.9.1. If you are seeking a hotel permit, do you meet the general requirements of IC 7.1-3-20-18?  Yes  No

5.9.2. If you are seeking a resort hotel permit, do you meet the requirements of IC 7.1-3-20-21?  Yes  No

**5.10. HISTORIC DISTRICT**

5.10.1. If you are seeking a historic district permit, is the premises a restaurant located in a district that is on the National Register of Historic Places which includes a county courthouse, historic opera house, and historic jail and sheriff's house in accordance with IC 7.1-3-20-16(g)?  Yes  No

*If yes, you must submit the appropriate documentation, including a district map identifying the location of your restaurant, an approval letter from a city or town representative that indicates whether the city or town adopted an ordinance that requires a written commitment pursuant to IC 7.1-3-19-17, and a copy of the ordinance creating the district. If the city or town ordinance requires a written commitment, you must also submit a copy of the written commitment.*

**5.11. AIRPORT, ECONOMIC DEVELOPMENT AREA, MOTOR SPORTS DISTRICT, RAILWAY STATION, REDEVELOPMENT DISTRICT, RENOVATION PROJECT, RIVERFRONT DISTRICT**

|  |  |
|--|--|
| <p><b>5.11.1.</b> Please specify the type of permit for which you are applying:</p>  | <hr style="width: 80%; margin: 0 auto;"/>                |
| <p><b>5.11.1.</b> Do you meet the statutory requirements for the designated permit identified above?</p> <p><i>If you are applying for a municipal riverfront/lakefront development permit (IC 7.1-3-20-16(d) and IC 7.1-3-20-16.1) or a lakefront development permit, motorsports development permit IC 7.1-3-20-16(k) or (l), redevelopment permit (IC 7.1-3-20-16.8), or renovation project (IC 7.1-3-20-16(e)(2)), you must also submit a letter indicating that the statutory requirements have been met and the mayor's approval of the permit, a map of the district identifying the premises location, and a copy of the ordinance creating the district.</i></p> <p><i>If you are applying for a permit in a publicly owned airport (IC 7.1-3-20-16(b)), union railway station (IC 7.1-3-20-16(c)), railway station (IC 7.1-3-20-16(e)), cultural center (IC 7.1-3-20-16(f)), or redevelopment district (IC 7.1-3-20-16(h) and (i)), please submit supporting documentation showing that your premises is located in a district that meets the qualification of the section authorizing the permit.</i></p> <p><i>If you are applying for a lakefront district permit pursuant to IC 7.1-3-20-16(j) and IC 7.1-3-20-16.2, please submit a map of the district identifying the location of your restaurant, detailed information concerning the expenditures of the state, local, and federal funds on the municipal lakefront development project, and a copy of the local ordinance or resolution authorizing the municipal lakefront development project.</i></p> <p><i>If you are applying for a rail transit development district permit pursuant to IC 7.1-3-20-16.8(o), please submit a map of the district identifying the location of your restaurant, approval letter from Michigan City, and approval letter from the Northwest Indiana Regional Development Authority.</i></p> | <input type="checkbox"/> Yes <input type="checkbox"/> No |

**5.12. EXCURSION BOAT**

|  |  |
|--|--|
| <p><b>5.12.1.</b> If you are applying for an excursion boat permit, do you engage in regular passenger service which makes regular runs in seasonal weather between established locations?</p> | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <p><b>5.12.2.</b> Are you requesting a jumbo boat designation?<br/><i>(If yes, please attach a copy of the United States Coast Guard certification)</i></p>                                    | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <p><b>5.12.3.</b> If yes, is the boat at least 135 feet long and 35 feet wide?</p>   | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| <p><b>5.12.4.</b> If yes, will the boat dock in more than one county?<br/><br/><i>If yes, please list each county:</i></p> <p>_____</p>  | <input type="checkbox"/> Yes <input type="checkbox"/> No |

**5.13. HORSE TRACK FACILITY / SATELLITE**

|  |  |  |
|--|--|--|
| <p><b>5.13.1.</b> If you are applying for a horse track permit, do you currently hold a valid recognized meeting permit issued by the Indiana Gaming Commission?</p> | <input type="checkbox"/> Yes <input type="checkbox"/> No |  |
| <p>Permit number of recognized meeting</p>   | <p>Date of issuance (mm/dd/yyyy)</p>                     | <p>Date of expiration (mm/dd/yyyy)</p> |
| <p><b>5.13.2.</b> Are you applying for a satellite permit?</p>   | <input type="checkbox"/> Yes <input type="checkbox"/> No |  |
| <p>License number of satellite facility</p>  | <p>Date of issuance (mm/dd/yyyy)</p>                     | <p>Date of expiration (mm/dd/yyyy)</p> |

**5.14. CIVIC CENTER, MALL, MARKET**

|  |  |
|--|--|
| <p><b>5.14.1.</b> Please check the permit type for which you are applying:</p> <p><input type="checkbox"/> Public facility of a stadium, exhibition hall, auditorium, theater, convention center, or civic center that qualifies for a permit under IC 7.1-3-1-25.</p> <p><input type="checkbox"/> An entertainment complex that qualifies for a permit under IC 7.1-3-1-25(e).</p> <p><input type="checkbox"/> Retail space in a mall pursuant to IC 7.1-3-20-24.4.</p> <p><input type="checkbox"/> Retail space in a city market pursuant to IC 7.1-3-20-25.</p> |  |
|--|--|

**5.15 INDOOR THEATER**

|  |  |
|--|--|
| <p><b>5.15.1.</b> Do you meet the requirements set forth in IC 7.1-3-20-26(b)?</p> | <input type="checkbox"/> Yes <input type="checkbox"/> No |
|--|--|

|   |  |   |
|---|--|---|
| <b>5.16. FOOD HALL MASTER</b>   |  |   |
| 5.16.1. Do you meet the requirements set forth in IC 7.1-3-20-29?   | <input type="checkbox"/> Yes <input type="checkbox"/> No |   |
| <b>5.17. FOOD HALL VENDOR</b>   |  |   |
| 5.17.1. Are you applying for a one-way, two-way, or three-way permit?   | <input type="checkbox"/> One-way                         | <input type="checkbox"/> Two-way <input type="checkbox"/> Three-way |
| 5.17.2. List the permit number for the master food hall permit where the premises is located: _____   |  |   |
| 5.17.3. What is the size of your vending space?   | <input type="checkbox"/> Less than 1,000 square feet     | <input type="checkbox"/> At least 1,000 square feet                 |
| <b>5.18. GAMING SITE</b>  |  |   |
| 5.18.1. If you are applying for a gaming site permit, do you hold a valid riverboat license under IC 4-33-6, an operating agent contract under IC 4-33-6.5, or a gambling game license under IC 7.1-25?   | <input type="checkbox"/> Yes <input type="checkbox"/> No |   |
| License number of gaming site   | Date of issuance (mm/dd/yyyy)                            | Date of expiration (mm/dd/yyyy)                                     |
| <b>5.19. DINING CAR</b>   |  |   |
| 5.19.1. Do you own a railroad as a public carrier or cars which are operated as part of railroad train?   | <input type="checkbox"/> Yes <input type="checkbox"/> No |   |
| <b>5.20. RACE TRACK</b>   |  |   |
| 5.20.1. Do you operate an outdoor facility with the main purpose and function being organized sporting competition that does not include a facility to which IC 7.1-3-1-25(a) applies or a tract located in a county containing a consolidated city that contains a premises used in connection with the operation of a paved track more than two (2) miles in length that is used primarily in the sport of auto racing?   | <input type="checkbox"/> Yes <input type="checkbox"/> No |   |
| <b>SECTION 6: DEALER PERMIT QUESTIONS</b><br>(Skip to next section if you are not applying for a dealer permit.)  |  |   |
| <b>6.1. GROCERY STORE</b>   |  |   |
| 6.1.1. If you are applying for a beer and/or wine grocery store permit, please select the appropriate category below: (Please refer to IC 7.1-1-3-18.5 for more information on what qualifies as a grocery store.)  |  |   |
| <p>A supermarket, grocery store, or delicatessen that is primarily engaged in the retail sale of a general food line, including:</p> <p>(a) canned and frozen foods;</p> <p>(b) fresh fruits and vegetables; and</p> <p>(c) fresh and prepared meats, fish, and poultry.</p> <p>A convenience store or food mart primarily engaged in:</p> <p>(a) the retail sale of a line of goods, including milk, bread, soda, and snacks; or</p> <p>(b) the retail sale of automotive fuels and the retail sale of a line of goods including milk, bread, soda, and snacks; and</p> <p>(c) the sale of alcoholic beverages represents 25% or less of annual gross sales (excluding gasoline and automotive oil products).</p> <p>A warehouse club, superstore, supercenter, or general merchandise store that is primarily engaged in the retail sale of a general line of groceries or gourmet foods in combination with general lines of new merchandise, which may include apparel, furniture, and appliances.</p> <p>A specialty or gourmet food store primarily engaged in the retail sale of miscellaneous specialty foods not for immediate consumption and not made on the premises, not including: (a) meat, fish, and seafood; (b) fruits and vegetables; (c) confections, nuts, and popcorn; and (d) baked goods.</p> |  |   |
| <b>6.2. PACKAGE LIQUOR STORE</b>  |  |   |
| 6.2.1. Does your business meet the definition of a package liquor store under IC 7.1-1-3-28?  | <input type="checkbox"/> Yes <input type="checkbox"/> No |   |
| <b>6.3. BEER, WINE, AND LIQUOR DRUG STORE PERMITS</b>   |  |   |
| 6.3.1. If you are applying for a beer, wine, and liquor drug store permit, do you hold a valid permit issued by the State Board of Pharmacy?  | <input type="checkbox"/> Yes <input type="checkbox"/> No |   |
| Permit number of pharmacy   | Expiration date (mm/dd/yyyy)                             | NPI/NPCPD Number  |
| <b>SECTION 7: MANAGER QUESTIONNAIRE</b>   |  |   |
| 7.1. Name of manager (last, first, middle initial)  | 7.2. Social Security number *                            |   |

|   |  |                                      |
|---|--|--------------------------------------|
| 7.3. Date of birth (mm/dd/yyyy)   | 7.4. Employee permit number                              | 7.5. Date of expiration (mm/dd/yyyy) |
| 7.6. Home address (number and street, city, state, and ZIP code)  |  |                                      |
| 7.7. Do you have lawful status in the United States as defined by IC 9-13-2-92.3?   | <input type="checkbox"/> Yes <input type="checkbox"/> No |                                      |
| 7.8. Are you at least twenty-one (21) years old?  | <input type="checkbox"/> Yes <input type="checkbox"/> No |                                      |
| 7.9. Are you an officer or employee of a non-resident of the state of Indiana that is engaged in the alcoholic beverage traffic or engaged in carrying on any phase of the manufacture of, traffic in, or transportation of alcoholic beverages without a permit under Title 7.1 of the Indiana Code?                               | <input type="checkbox"/> Yes <input type="checkbox"/> No |                                      |
| 7.10. Are you a law enforcement officer, a non-elected officer of a municipal corporation or governmental subdivision, or an officer of the state of Indiana charged with any duty or function in the enforcement of Title 7.1 of the Indiana Code?   | <input type="checkbox"/> Yes <input type="checkbox"/> No |                                      |
| 7.11. Have you ever been convicted of a felony or misdemeanor? <i>If yes, please attach a letter with conviction, court, date, and sentence information. Do not include convictions that have been expunged under IC 35-38-9.</i>   | <input type="checkbox"/> Yes <input type="checkbox"/> No |                                      |
| 7.12. Have you ever been found to have committed a violation of the Indiana alcoholic beverage laws, rules, regulations, or orders of the Commission? <i>If yes, please attach a letter detailing the conviction(s) and/or violation(s), including any permit number(s).</i>  | <input type="checkbox"/> Yes <input type="checkbox"/> No |                                      |
| 7.13. Have you held an alcoholic beverage permit under Title 7.1 of the Indiana Code and had the permit revoked within one (1) year prior to the date of this application? <i>If yes, please provide the permit number(s) and an explanation.</i>   | <input type="checkbox"/> Yes <input type="checkbox"/> No |                                      |
| 7.14. Have you made an application for an alcoholic beverage permit of any type which was denied less than one (1) year to the date of this application (unless the application was denied by reason of a procedural or technical defect)? <i>If yes, please attach an explanation.</i>   | <input type="checkbox"/> Yes <input type="checkbox"/> No |                                      |
| 7.15. Do you have an interest, either directly or indirectly, in any other permits or registrations of any kind issued under Title 7.1 of the Indiana Code connected with, but not limited to, the production, distribution, transportation, or sale of alcoholic beverages? <i>If yes, please list the permit number(s) below.</i> | <input type="checkbox"/> Yes <input type="checkbox"/> No |                                      |
| Permit number(s)  |  |                                      |
| Signature of manager  |  | Date (mm/dd/yyyy)                    |

### SECTION 8: FLOOR PLAN

All applicants must submit a floor plan drawing on letter size (8½" x 11") paper attached to this application. The drawing must show dimensions and identifications of any existing family room(s), seating arrangement(s), ballroom(s), bar(s), dance floor area(s), kitchen area(s), restrooms, storage and office areas, entrances/exits, patios, beer gardens, service windows, and alcoholic beverage display areas for all types of permits. Please sign and date the drawing.

NOTE: A floor plan of the licensed premises must be approved before a permit is issued. If you have any questions regarding floor plans, please contact the appropriate Indiana State Excise Police district office: [www.in.gov/atc/isep/contact-us/](http://www.in.gov/atc/isep/contact-us/).

### SECTION 9: CERTIFICATION OF APPLICANT

I certify that this application was completed by myself or by the preparer identified below. I certify that I have read this completed document and that all information provided herein and on any attachments is true and correct. **I UNDERSTAND THAT IT IS A FELONY UNDER LAW TO MISREPRESENT OR FALSIFY ANY PORTION OF THIS APPLICATION OR ATTACHED DOCUMENTS.**

I hereby consent for the duration of the permit term to inspection and search by an enforcement officer, without a warrant or other process, of my licensed premises, any approved satellite facility, approved storage facility, and vehicles to determine compliance with the provision of Indiana Code 7.1.

**NOTE: The applicant MUST sign this application unless the proper Power of Attorney forms are attached to this application.**

|                           |                          |
|---------------------------|--------------------------|
| Signature of applicant    | Date signed (mm/dd/yyyy) |
| Printed name of applicant | Title of applicant       |

### SECTION 10: CERTIFICATION OF PREPARER (if applicable)

I certify that I have examined this application and the accompanying documents, and to the best of my knowledge and belief, they are true, correct, and complete. I certify that the applicant reviewed the completed form prior to signing.

|                          |                          |
|--------------------------|--------------------------|
| Signature of preparer    | Date signed (mm/dd/yyyy) |
| Printed name of preparer | Telephone number         |

**SECTION 11: PAYMENT AND CONTACT INFORMATION**

Payment must be in the form of a business check, certified check, or money order made payable to the Indiana Alcohol and Tobacco Commission.

Applications without payment will be returned.

Indiana Alcohol and Tobacco Commission  
302 West Washington Street, Room E-114  
Indianapolis, IN 46204  
(317) 232-2430  
[www.in.gov/atc](http://www.in.gov/atc)