City of Buda, Texas

Application for Alcoholic Beverage Permit

Date: _____

Applicant: _____

Business Known As: _____

Location Address: _____ Mailing Address: _____

Contact Phone No. _____ Email Address: _____

Type of TABC License or Permit Filing For: _____ Food & Beverage Permit: ❒ Yes ❒ No

Is your business defined as a food service establishment? ❒ Yes ❒ No

Do you pay a "food service fee" to TABC? ❒ Yes ❒ No If yes, supply a copy of the TABC permit.

Are you renewing the current ***CITY*** alcohol beverage permit? ❒ No ❒ Yes, permit number: _____

Will your business be located within 300 feet of a church or public hospital? ❒ Yes ❒ No

Will your business be located within 300 feet of any private/public school? ❒ Yes ❒ No

Will your business be located within 300 feet of any day care center or childcare facility? ❒ Yes ❒ No

If any information submitted in this application is found to be incorrect, any permits issued in connection with this application may be subject to revocation. The fee for your City Alcohol Permit is one half of the fees paid for all licenses obtained from the TABC for the permitted location. Make all checks payable to the City of Buda.

I have read the above application and affirm that the statements herein contained are true and correct.

_____ _____

Signature of Applicant or Applicant's Agent Date

State of Texas, County of _____

On the ____ day of _____, 20____, _____ personally appeared before me, and being first duly sworn, declared that he/she signed this application in the capacity designated, if any, and further states that he/she has read the above application and affirmed that the statements therein contained are true.

_____

Notary Public, State of Texas

For Office Use Only Below Line

Planning Department Zoning Approval:

Does the zoning for the above referenced site permit the described alcohol sales activity? ❒ Yes ❒ No

Has the applicant filed for a Certificate of Occupancy? ❒ Yes ❒ No

_____ _____ _____

Staff Signature Title Date

City Clerk's Office

Application:

❒ Approved by: _____ Date: _____ ❒ Denied by: _____ Date: _____