

For Questions call
 (614) 644-3155
 Office Hours -
 8:00 - 5:00

OHIO DEPARTMENT OF COMMERCE
 DIVISION OF LIQUOR CONTROL
 6606 TUSSING ROAD, P.O. BOX 4005
 REYNOLDSBURG, OHIO 43068-9005
<http://www.com.ohio.gov/liqr>



APPLICATION FOR NEW D-5B PERMIT - Fee \$2,344.00

CAUTION: ALLOW 10 TO 12 WEEKS FOR PROCESSING

THE FOLLOWING ITEMS MUST BE SUBMITTED FOR YOUR APPLICATION TO BE ACCEPTED FOR PROCESSING

- A. Processing Fee of \$100.00
- B. Application completed in its entirety, notarized and signed.
- C. If Individual, list Social Security Number on line provided. _____.
- D. If Partnership, you must submit a completed DLC Form 4031, along with a copy of the Partnership Agreement.
- E. If Corporation, you must submit a **completed** DLC Form 4030.
- F. If Limited Liability Company, you must submit a completed DLC Form 4032.
- G. If filing for a D-6, you are not required to submit any documentation listed on page 4, complete A & C only on pages 1 & 2.

Please be advised that any social security numbers provided to the Division of Liquor Control in this application may be released to the Ohio Department of Public Safety, the Ohio Department of Taxation, the Ohio Attorney General, or to any other state or local law enforcement agency if the agency requests the social security number to conduct an investigation, implement an enforcement action, or collect taxes.

FAILURE TO RESPOND TO ALL QUESTIONS WILL RESULT IN THE RETURN OF YOUR APPLICATION.

If you would like a Class D6 with your D-5B, please check the box: D-6 - with D class \$500.00

(WHEN APPLYING FOR D-6 CLASS ALONE, YOU ARE ONLY REQUIRED TO COMPLETE SECTIONS A, B, & D).

SECTION A

NAME OF ENCLOSED SHOPPING CENTER OR MALL:

Address:	City:	State:	Zip Code:
----------	-------	--------	-----------

1. Is enclosed shopping center or mall under construction? YES NO

If YES, give estimated date of completion on the line provided, _____

SECTION B

Applicant (Individual, Corporation, Limited Liability Company or Partnership)

DBA (doing business as):

Permit Premises Address:

Township (if outside city limits):

City:

Zip Code:

County:

Residence Phone #:

Business Phone #:

Email Address:

Attorney's Name:

Address:

City, State, & Zip:

Phone #

Pending or Issued State Liquor Agency Number, (if applicable):

FOR DIVISION USE ONLY

Coder:	CLASS	RCPT#	REMARKS:	REVIEWER ACTION:
Taxing District:			Proc. Fee Pd: <input type="checkbox"/> YES <input type="checkbox"/> NO	
Permit Number			BCI Fee Amount Paid: \$ _____	
Trans. Code	Bus. Type			

SECTION C

- 1. Do you or any partner, office holder, managing member, 5% stockholder or member, spouse, or other person involved in this permit hold or have any interest in another permit business? YES NO
If YES, Give permit number & address on the line provided _____

- 2a. Have you or any partner, office holder, managing member, 5% stockholder or member, spouse, or other person involved in this permit ever been convicted of a felony or misdemeanor, or pled guilty, accepted a plea bargain or reduced charge in any criminal proceeding, including any alcohol-related offenses, or criminal traffic offense? YES NO
If YES, attach a written explanation.
- 2b. If applicant is a sole proprietor or partnership, will spouse work on the permit premises? YES NO
If YES, indicate spouse's full name _____

- 3. Have you or any partner, office holder, managing member, 5% stockholder or member, spouse, or other person involved in this permit ever been refused a permit, denied a renewal, or had a permit revoked from another state, by this Division, or the Liquor Commission? **If YES, attach a written explanation.** YES NO

- 4. Do you own the real estate on which the proposed business will be located? YES NO
If NO, return a completed a signed and dated copy of your LEASE OR RENTAL CONTRACT, OR SUMMARY OF TENANCY RIGHTS form (DLC form 4085).

- 5. Will the applicant be the sole owner of the business and equipment? YES NO
If NO, and the fixtures or equipment are rented, submit signed and dated copy of rental agreement.

- 6. Will any person, partnership, LLC, or corporation, excluding banks or building and loan associations, have ANY financial interest (such as money, loans, installment contracts, property or other interest) or share in the profits in your business or your property, real or personal? YES NO
If YES, attach an affidavit with details. NOTE: Ohio Revised Code Section 4303.293 provides a criminal penalty for failure to answer this question completely and correctly.

- 7. If filing as an individual or partnership, is individual or all partners a U.S. citizen? YES NO

- 8. Do you or any partner, office holder, managing member, 5% stockholder or member, employee, spouse, or other person involved in this permit own any stock or have any interest in the business of a manufacturer or wholesale distributor of alcoholic beverages? **If YES, attach a written explanation.** YES NO

SECTION D - SHOULD BE ANSWERED ONLY IF APPLYING FOR A D-6

- 9. What percentage of your total gross receipts is currently, or do you estimate will be, attributed to the sale of food and other goods (excluding alcoholic beverages)? _____
- 10. If you hold "D" class permit(s) and your D-6 request can be approved for carryout only, do you still desire this permit? YES NO

DELIBERATE MISREPRESENTATION OF ANY OF THE INFORMATION ON THE APPLICATION CAN RESULT IN THE DIVISION'S REFUSING TO APPROVE THIS APPLICATION.

THE FOLLOWING MUST BE COMPLETED BY THE APPLICANT:

State of Ohio, _____ County, ss

I, _____ being first duly sworn, according to law, depose and say that the statements
(Please Print)
and answers made in the foregoing application are true.

(Signature of Individual, Partner, Officer, Managing Member, or 5% or more Stockholder or Member) (Title) (Date)

(Residence Address) (City) (State) (Zip Code) (Area Code & Telephone Number)

(To be completed by Notary Public)

Sworn to before me and subscribed in my presence this _____ day of _____, 20_____.

(Notary Public) (Notary Expiration)

NOTE: ALL DOCUMENTS BECOME PART OF THE PERMIT FILE AND WILL NOT BE RETURNED

REQUIRED DOCUMENTS FOR ACCEPTANCE OF A D5B PERMIT APPLICATION

Please use the list below  to check off all items as you complete them, to submit with the application packet. CAUTION: ALLOW 10 TO 12 WEEKS FOR PROCESSING.

FAILURE TO SUBMIT THE FOLLOWING DOCUMENTS MAY RESULT IN THE RETURN OF YOUR APPLICATION, UNRECEIVED, WITH THE POSSIBLE LOSS OF PRIORITY ON THE QUOTA LIST.

- Application:** Application must be completed in full, all questions answered, signed, and notarized.
- Application Processing Fee:** \$100.00 - Check made payable to Division of Liquor Control.
- Background Check:** PLEASE READ "BACKGROUND CHECK INFORMATION" DLC 4191
- Personal History Background Form: (DLC 4121)** Section A. ONLY must be completed in full for each stockholder or officer for whom a background check will be performed by the Ohio Bureau of Identification and Investigation (BCI&I).
- Lease or Tenancy Agreement:** Submit copy of signed and dated lease, tenancy agreement, or may submit DLC Form 4085 "Summary of Tenancy Rights" completed in full.
- Financial Verification:** This form (DLC 4096) is to be completed in full, attaching supporting documentation if necessary.
- Copy of Food Service Operator OR Food Establishment License:** Only if applying for Class A1A, D1, D2, D3, D5, D5A, D5C, D5D, D5F, D5I, D5J, D5K, D5L, D5M or D7 permit(s).
- Rental Agreement:** If fixtures and equipment are rented.

REQUIRED DOCUMENT TO BE FILED WITH NON PROFIT ENTITIES

- 4029:** To be filed with Governmental or Educational entities, or other non-profit businesses. Form must be completed in full. List the top five officers, including social security numbers. This form must be notarized.

REQUIRED DOCUMENTS TO BE FILED WITH CORPORATIONS ONLY

- 4030 Form (Corporation):** Form must be completed in full. List the top five officers, including social security numbers. Indicate all stockholders over 5% including social security numbers. Indicate total shares issued. Must be notarized.
- Certificate of Good Standing From the Secretary of State:** If not incorporated in the State of Ohio, submit a copy of CERTIFICATE OF AUTHORITY TO DO BUSINESS IN OHIO, issued by the Ohio Secretary of State. If corporation is nonprofit, submit a Certificate of CONTINUED EXISTENCE from the Ohio Secretary of State. Ohio Secretary of State: (614) 466-3910 or 1-877-767-3453 - www.sos.state.oh.us

REQUIRED DOCUMENTS TO BE FILED WITH PARTNERSHIPS

- 4031 Form (Partnership):** Form must be completed in full. Indicate all partners or corporations within a partnership including social security number or tax identification number. Limited Partnerships need only indicate general partners. Must be notarized.
- Partnership Agreement (If General Partnership):** If name is different from and not including the names of all partners. Must be dated within one year of the filing of this application.
- Certificate of Fictitious Name from the Secretary of State:** Ohio Secretary of State: (614) 466-3910 or 1-877-767-3453 www.sos.state.oh.us

REQUIRED DOCUMENTS TO BE FILED WITH LIMITED LIABILITY COMPANIES

- 4032 Form (LLC):** Form must be completed in full, indicating all members with 5% or more membership or voting interest, all managing members, and officers, if applicable, including social security numbers. Must be notarized.
- Certificate of Organization from the Secretary of State:** Ohio Secretary of State: (614) 466-3910 or 1-877-767-3453 www.sos.state.oh.us

**ADDITIONAL DOCUMENTATION THAT MAY BE REQUESTED *DURING THE PROCESSING*
OF YOUR D5B APPLICATION, EXCEPT CLASSES D-3A, D-6, and D-8**

ADDITIONAL INFORMATION:

1. When filing as an individual, make certain you indicate the "individuals name" under Section B on page 1 of the application. The name of the actual business may then be listed under "DBA" (doing business as).
2. An individual or a majority of the partners in a partnership **must** have been a resident of the State of Ohio for at least one (1) year prior to filing an application. **All** individuals and partners must have U.S. Citizenship. (This does not apply to stockholders in a corporation, or members in an LLC).
3. ISSUANCE OF PERMITS IS SUBJECT TO THE WET OR DRY STATUS OF THE LOCATION, AND MAY BE SUBJECT TO THE EXISTENCE OF AN OPENING UNDER THE QUOTA.
4. Return the application, all fees, and all required documents to:

**OHIO DEPARTMENT OF COMMERCE - DIVISION OF LIQUOR CONTROL
6606 TUSSING ROAD, P.O. BOX 4005
REYNOLDSBURG, OHIO 43068-9005**

WARNING: NO permit will be issued until the proposed business is ready for operation and meets Division regulations **ALL CONSTRUCTION OR REMODELING COSTS ARE AT THE APPLICANT'S RISK, AS THE DIVISION CANNOT GUARANTEE THE ISSUANCE OF A PERMIT.**