

Michigan Department of Licensing and Regulatory Affairs Liquor Control Commission (MLCC) Toll-Free: 866-813-0011 - www.michigan.gov/lcc

**Business ID:** 

Request ID:

### **Banquet Facility Permit Application**

(For MLCC Use Only)

(Authorized by MCL 436.1522)

#### Part 1 - Licensee Information

Individuals, please state your legal name. Corporations or Limited Liability Companies, please state your name as it is filed with the State of Michigan Corporation Division.

Licensee name(s):	
Address:	
City:	Zip Code:

Address of proposed banquet facility:

City/township/village where banquet facility will be located:

1. You must obtain approval for the proposed banquet facility from the legislative body of the local governmental unit where the facility will be located. See Local Government Approval Form (Form LCC-106)

2. The proposed banquet facility shall be used only for scheduled functions and events, shall not have regular meal service, and shall not be generally open to the public.

3. You must provide documentary proof that you have a preexisting ownership or lease interest in the proposed banquet facility, such as a deed, land contract, lease, or other executed documentation to demonstrate you have authority to operate the proposed banquet facility at the proposed location.

4. You must demonstrate to the Commission that at least 50% of the gross receipts for your existing on-premises license are derived from the sale of food and nonalcoholic beverages prepared for consumption at your existing licensed premises.

#### Part 2 - Permits, and Permissions (To Be Held In Conjunction with Banquet Facility Permit)

Permits & Permissions New Transfer	Base Fee:	Fee Code MLCC Use Only	Permits & Permissions	Base Fee:
Banquet Facility Permit	\$600.00		Extended Hours Permit:	No charge
Sunday Sales Permit (AM)*	\$160.00		O Dance O Entertainment Days/	Hours:
Sunday Sales Permit (PM)**	\$90.00		Specific Purpose Permit:	No charge
Outdoor Service	No charge		Activity requested:	
Dance Permit	No charge		Days/Hours:	
Entertainment Permit	No charge		Topless Activity Permit	No charge

\*Sunday Sales Permit (AM) allows the sale of liquor, beer, and wine on Sunday mornings between 7:00am and 12:00 noon, if allowed by the local unit of government. (For banquet facilities held in conjunction with A-Hotel, B-Hotel, Tavern, or Class C licenses)

\*\*Sunday Sales Permit (PM) allows the sale of liquor on Sunday afternoons and evenings between 12:00 noon and 2:00am (Monday morning), if allowed by the local unit of government. No Sunday Sales Permit (PM) is required for the sale of beer and wine on Sunday after 12:00 noon. (For banquet facilities held in conjunction with B-Hotel or Class C licenses ONLY.)

#### Part 3 - Inspection and Permit Fees - Make checks payable to State of Michigan

<u>Inspection Fee and Permit Fees</u> - Pursuant to MCL 436.1529(4) a nonrefundable inspection fee of \$70.00 shall be paid to the Commission by a licensee at the time of filing of a request for a new license or permit. Requests for a new permit in conjunction with a request for a new license or transfer of an existing license do not require an additional inspection fee. Pursuant to MCL 436.1525(1), permit fees shall be paid to the Commission for a request for a new permit.

Check if this request is part of a request for a new licence or transfer of an existing license.

Leave Blank - MLCC Use Only

Inspection Fee: Permit Fee(s): TOTAL FEES:	Inspection Fee:	Permit Fee(s):	TOTAL FEES:
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#### Part 4 - Contact Information For This Application

What is your preferred method of cont		○ Phone ○ Mail	⊖ Email	○ Fax	
What is your preferred method for receiving a Commission Order?			⊂ Mail	⊖ Email	○ Fax
Contact name:		Relationship:			
Mailing address:					
Phone:	Fax number:		Email:		

#### Part 5 - Attorney Information (If You Have An Attorney Representing You For This Application)

Attorney name:		Member Number: P-		
Attorney address:				
Phone:	Fax number:	Email:		
Would you prefer that we contact your attorney for all licensing matters related to this application? O Yes O No			∩ No	
Would you prefer any notices or closing packages be sent directly to your attorney?			∩ No	

#### Part 6 - Signature of Licensee

# Be advised that the information contained in this application will only be used for this request. This section will need to be completed for each subsequent request you make with this office.

**Notice:** Under administrative rule R 436.1003, the licensee shall comply with all state and local building, plumbing, zoning, sanitation, and health laws, rules, and ordinances as determined by the state and local law enforcements officials who have jurisdiction over the licensee. Approval of this application by the Michigan Liquor Control Commission does not waive any of these requirements. The licensee must obtain all other required state and local licenses, permits, and approvals for this business before using this license for the sale of alcoholic liquor on the licensed premises.

I certify that the information contained in this form is true and accurate to the best of my knowledge and belief. I agree to comply with all requirements of the Michigan Liquor Control Code and Administrative Rules. I also understand that providing **false** or **fraudulent** information is a violation of the Liquor Control Code pursuant to MCL 436.2003.

The person signing this form has demonstrated that they have authorization to do so and have attached appropriate documentation as proof.

Print Name of Licensee & Title

Signature of Licensee

Date

Please return this completed form along with corresponding documents and fees to: Michigan Liquor Control Commission Mailing address: P.O. Box 30005, Lansing, MI 48909 Overnight deliveries: 2407 N. Grand River Ave, Lansing, MI 48906 Fax to: 517-284-8557



Michigan Department of Licensing and Regulatory Affairs Finance and Administrative Services Revenue Services

## **Credit Card Authorization Form**

## \*\* FAX COMPLETED FORM TO SECURE FAX LINE: 517-284-8557 \*\* \*\* DO NOT EMAIL OR MAIL THIS FORM \*\*

Requests with credit card payments that are not faxed to the above secure fax line will be destroyed along with the credit card authorization in order to ensure the security of applicants' personal credit card numbers.

#### \* \*<u>IF YOU ARE NOT SUBMITTING AN APPLICATION FORM WITH THIS CREDIT CARD AUTHORIZATION, YOU MUST PROVIDE AN</u> ITEMIZATION OF THE FEES FOR WHICH YOU ARE SUBMITTING PAYMENT OR YOUR PAYMENT WILL NOT BE PROCESSED\*\*

Name:			Transaction Amount:	
Address:			Card Number:	
City:			Check One:	
State:			○ MasterCard ○ Visa ○ Discover ○ American Express	
Zip Code:			Security Code/CVV Code:	
Phone:			Expiration Date:	
Applicant/Licensee Name:	Request or Bus	iness ID #:		
Payment is for	:			
			Signature	
IF YOU ARE NOT SUBMITTING AN APPLICATION FORM WITH THIS CREDIT CARD AUTHORIZATION, YOU MUST PROVIDE AN ITEMIZATION OF THE FEES FOR WHICH YOU ARE SUBMITTING PAYMENT OR YOUR PAYMENT WILL NOT BE PROCESSED. Credit Card Payment Itemization:		Commission (MLCC). Receipt of payment and application forms by LARA Revenue Services does not constitute receipt of an application by the MLCC. Applications submitted through LARA Revenue Services may take up to two (2) additional business days to be received by the MLCC after receipt by LARA Revenue Services.		
Fee Type	Fee Amount	Fee Code	For requests that require a timely receipt of an application by the	
Inspection Fee(s):		4036	MLCC to be processed, such as Special Licenses and temporary	
Special License Fee(s):		4008	requests, please ensure that your application will be received in adequate time to be processed by the MLCC after the payment is	
Temporary Authorization Fee:		4037	received and processed by LARA Revenue Services.	
License Renewal Fee(s):		4004		
Manufacturer License(s):		4038		
Wholesaler License(s):		4085		
New Retailer License(s):		4012		
Transfer Retailer License(s):		4034		
Conditional License		4012		
New Add Bar 🔲 Transfer Add Bar:		4012/4034		
Sunday Sales Permit (AM):		4033		
Sunday Sales Permit (PM):		4032		
Catering Permit:		4031		

LCC-300 (02-18)

LARA is an equal opportunity employer/program. Auxiliary aids, services and other reasonable accommodations are available upon request to individuals with disabilities.