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

Business ID: _____

Request ID: _____

(For MLCC Use Only)

Secondary Location Permit Application

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:	
Contact name:	Phone:	Email:

Part 2 - Secondary Location Information

If the secondary location operator is a subsidiary or affiliate of the licensee, also complete Part 5 on page 2. Documentation of the subsidiary or affiliate relationship will be required. Secondary location must be located on or adjacent to the primary licensed premises listed above.

Name of secondary location operator: (if different than licensee)	
Secondary location address: (if different than above)	
City:	Zip Code:
Secondary location is located: *(select one)* ☐ On the primary licensed premises ☐ Adjacent to the primary licensed premises	Number of motor vehicle fuel pumps:

Part 3 - Fees & Required Documents

☐ $70.00 inspection fee - Not required if request for Secondary Location Permit is part of a request for a new license or transfer of an existing license.
Fee Code 4036

☐ $100.00 Secondary Location Permit fee - Note: Secondary Location Permit fee is an annual fee required at the time the license is renewed.
Fee Code 4011

Optional Additional Permits: ☐ $160.00 Sunday Sales Permit (A.M.) fee
Fee Code 4033

☐ Beer and Wine Tasting Permit (No Charge)

Leave Blank - MLCC Use Only

TOTAL FEES DUE: _____ Make check payable to **State of Michigan**.

☐ Diagram of secondary location - Diagram must include the secondary location building dimensions and a depiction of the distance measurement between the motor vehicle fuel pumps and the site of payment and selection of alcoholic liquor (the minimum distance is 5 feet).

☐ Property document - A lease, deed, or land contract, which demonstrates that the licensee or operator has control over the secondary location.

☐ Subsidiary or affiliation documentation - Only required if the licensee and secondary location operator are different entities. Submit a flowchart and affidavit demonstrating the affiliation between the licensee and the secondary location operator.

Part 4 - Signature of Licensee

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. By signing this application, I am freely and voluntarily consenting and submitting to inspections of the licensed premises in accordance with MCL 436.1217(2)-(3) and R 436.1011(4). I also understand that providing **false** or **fraudulent** information is a violation of the Liquor Control Code pursuant to MCL 436.2003.

Print Name of Licensee & Title	Signature of Licensee	Date

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

Part 5a - Specific Information on Secondary Location Operator (if not the licensee)

Each individual person that will be a secondary location operator that is not the licensee must complete Part 5a, 5b, and 5c. If the secondary location operator is a corporation or limited liability company, complete Part 5a and 5c for the operator AND submit Form LCC-301 for the corporation or LLC.

Name:			
☐ Individual ☐ Corporation ☐ Limited Liability Company ☐ Limited Partnership			
Address:			
City:		State:	Zip Code:
Contact name:	Phone:	Email:	
Have you ever been licensed by the Michigan Liquor Control Commission (MLCC) or do you currently hold an interest in any other licenses issued by the MLCC? ◯ Yes ◯ No			

Part 5b - Personal Information (Individuals)

Date of Birth:	Social Security Number:	Driver's License Number:
Are you a citizen of the United States of America? ◯ Yes ◯ No		
Have you ever legally changed your name? ◯ Yes ◯ No		
If you answered "yes", please list your prior name(s) (including maiden):		
Spouse's full name (if currently married):		
Spouse's date of birth:	Is your spouse a citizen of the United States of America? ◯ Yes ◯ No	
Do you or your spouse hold any position, either by appointment or election, which involves the duty to enforce any penal law of the United States of America, or the penal laws of the State of Michigan, or any penal ordinance or resolution of any municipal subdivisions of the State of Michigan? ◯ Yes ◯ No		
Does your spouse hold a retail, manufacturer, or wholesaler license issued by the MLCC? ◯ Yes ◯ No		
Have you ever been found guilty, pled guilty, or pled no contest to a criminal charge or any local ordinance violations? If **Yes**, list below (attach additional pages if necessary): ◯ Yes ◯ No Date City/State Charge Disposition		
Has your spouse ever been found guilty, pled guilty, or pled no contest to a criminal charge or any local ordinance violations? If **Yes**, list below (attach additional pages if necessary): ◯ Yes ◯ No Date City/State Charge Disposition		

Part 5c - Signature of Secondary Location Operator

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. By signing this application, I am freely and voluntarily consenting and submitting to inspections of the licensed premises in accordance with MCL 436.1217(2)-(3) and R 436.1011(4). I also understand that providing **false** or **fraudulent** information is a violation of the Liquor Control Code pursuant to MCL 436.2003.

Name of Secondary Location Operator	Signature of Secondary Location Operator	Date

Please return this completed form along with corresponding fees and documents 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

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LARA
LICENSING AND REGULATORY AFFAIRS

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

LARA Revenue Services **is not** a part of the Michigan Liquor Control Commission (see note below).

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.

*** *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* ***

Name on Card: _____

Billing Address: _____

City: _____ State: _____ Zip Code: _____

Phone: _____

Email: _____

Applicant/Licensee Name: _____ Request or Business ID #: _____

Payment is for: _____

Payment Amount: _____

Card Number: _____

Check One:

◯ MasterCard ◯ Visa ◯ Discover ◯ American Express

Security Code/CVV Code: _____

Expiration Date: _____

_____
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:

Fee Type	Fee Amount	*MLCC Fee Code*
☐ Inspection Fee(s):		*4036*
☐ Special License Fee(s):		*4008*
☐ Temporary Authorization Fee:		*4037*
☐ 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*

LARA Revenue Services **is not** a part of the Michigan Liquor Control 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.**

For requests that require a timely receipt of an application by the MLCC to be processed, such as Special Licenses and temporary requests, please ensure that your application will be received in adequate time to be processed by the MLCC after the payment is received and processed by LARA Revenue Services.

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