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)

University Athletic Facility License & Permit Application (LCC-116)

Part 1 - University Governing Board Information

University governing board name:		
Name of athletic facility to be licensed:		
Address of athletic facility to be licensed:		
City:	Zip Code:	
City/township/village where license will be issued:		County:
Federal Employer Identification Number (FEIN):		

Part 2 - Required Documents

- ☐ Copy of the resolution by the governing board of the university authorizing this application.
- ☐ Copy of the property document (deed, lease, etc.) for the proposed licensed premises.

Part 3 - License, Permits, and Permissions & Required Fees

Pursuant to MCL 436.1529(4) a nonrefundable inspection fee of $70.00 shall be paid to the Commission by an applicant or licensee at the time of filing of a request for a new license or permit. Pursuant to MCL 436.1525(1), license and permit fees shall be paid to the Commission for a request for a new license.

License Type:	**Base Fee:**	*Fee Code MLCC Use Only*
☐ Tavern License	$250.00	*4012*
☐ Class C License	$600.00	*4012*
Class C Licenses Only:		
☐ Additional Bar(s) Number Requested: _____		
Each Additional Bar $350.00		*4012*

Sunday Sales Permits:	**Base Fee:**	
☐ Sunday Sales Permit (AM)*	$160.00	*4033*
☐ Sunday Sales Permit (PM)**		*4032*

*Sunday Sales Permit (AM) allows the sale of spirits, mixed spirit drink, beer, and wine on Sunday mornings between 7:00am and 12:00 noon, if allowed by the local unit of government.

**Sunday Sales Permit (PM) allows the sale of spirits and mixed spirit drink 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. The Sunday Sales Permit (PM) fee is 15% of the fee for the license that allows the sale of spirits or mixed spirit drink. Additional bar fees are also calculated as part of the permit fee.

Other Permits/Permssions:	**Base Fee:**
☐ Dance Permit	No charge
☐ Entertainment Permit	No charge
☐ Extended Hours Permit:	No charge
◯ Dance ◯ Entertainment Days/Hours: _____	
☐ Specific Purpose Permit:	No charge
Activity requested: _____	
Days/Hours requested: _____	
☐ Off-Premises Storage	No charge
☐ Direct Connection(s)	No charge
☐ Participation Permit (See Part 5)	No charge

Leave Blank - MLCC Use Only

Inspection Fees:	License & Permit Fees:	**TOTAL FEES:**

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

Part 4 - Non-Licensed Food Concessionaires

Pursuant to R 436.1433, the licensee must not contract with another person to provide food service on the licensed premises without written approval of the Commission. Any person or company that will be providing food service only must be approved in advance by the Commission. For companies providing food and alcoholic beverage service, please see Part 5 below regarding Participation Permits. A person or company approved to provide food service must not receive any portion of the sales and profits from the sale of alcoholic liquor on the premises and must not sell or serve any alcoholic liquor on the licensed premises.

List of Food Concessionaires - Attach separate page if necessary

If food concessionaire is an individual, please state the concessionaire's legal name. If food concessionaire is a Corporation or Limited Liability Company, please state the name as it is filed with the State of Michigan Corporations Division.

1.
2.
3.
4.
5.

Required Documents for Food Concessionaire Approval

☐ Copy of food service or concession agreement for each concessionaire.

Part 5 - Participant Permit Information

A Participation Permit is required when an unlicensed third-party will be using or benefitting from the license or will be obtaining a portion of the gross sales or net profits of the licensee. Third-party management companies that will be managing the sale and service of alcoholic liquor (beer, wine, mixed spirit drink, or spirits) for the licensee and will be receiving a portion of the gross sales or net profits, must be named as a participant under a Participation Permit.

Non-Licensed Participant General Information - Specific information required in Parts 5a-5c on next page

If participant is an individual, please state the participant's legal name. If participant is a Corporation or Limited Liability Company, please state the name as it is filed with the State of Michigan Corporations Division.

Non-licensed participant name:		
Non-licensed participant DBA name:		
Mailing address:		
City:	State:	Zip Code:

Required Documents for Participation Permit

☐ Good cause statement, pursuant to administrative rule R 436.1041.	*A good cause statement is a written explanation of why the licensee has applied for a Participation Permit and the qualifications of the proposed non-licensed participant.*
☐ Copy of participation/management agreement.	
1. What percentage of the gross sales or net profits of the licensed business will the non-licensed participant receive under the agreement?	%
2. What is the commencement date of the agreement?	
3. What is the duration of the agreement?	
☐ Copy of Articles of Incorporation or Organization and bylaws or operating agreement of non-licensed participant.	

Part 5a - Specific Information on Non-Licensed Participant

Each individual that will be a non-licensed participant must complete Part 5a, 5b, and 5c. If the participant is a corporation or limited liability company, complete Part 5a and 5c for the participant AND a separate copy of Part 5a, 5b and 5c for each stockholder/member of the participant entity.

Name:			
☐ Individual ☐ Corporation ☐ Limited Liability Company		☐ Stockholder ☐ Member	
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 retailer, 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 Participant

I authorize the MLCC to run an Internet Criminal History Access Tool (ICHAT) and Secretary of State (SOS) check prior to docketing your request for Commission review.

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 Participant/Title	Signature of Participant	Date

Part 6 - Contact Information For This Application

What is your preferred method of contact?	◯ Phone	◯ Mail	◯ Email ◯ Fax
What is your preferred method for receiving a Commission Order?		◯ Mail	◯ Email ◯ Fax
Contact name:	Relationship:		
Mailing address:			
City:	State:	Zip Code:	
Phone:	Fax number:	Email:	

Part 7 - 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?		◯ Yes	◯ No
Would you prefer any notices or closing packages be sent directly to your attorney?		◯ Yes	◯ No

Part 8 - Signature of Applicant

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: When purchasing a license, a buyer can be held liable for tax debts incurred by the previous owner. Prior to committing to the purchase of any license or establishment, the buyer should request a tax clearance certificate from the seller that indicates that all taxes have been paid up to the date of issuance. Obtaining sound professional assistance from an attorney or accountant can be helpful to identify and avoid any pitfalls and hidden liabilities when buying even a portion of a business. Sellers can make a request for the tax clearance certificate through the Michigan Department of Treasury.

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. 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.

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

Print Name of Applicant & Title	Signature of Applicant	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 Avenue, Lansing, MI 48906
Fax to: 517-284-8557

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*
☐ New Retailer License(s):	_____	*4012*
☐ New Additional Bar(s)	_____	*4012*
☐ Sunday Sales Permit (AM):	_____	*4033*
☐ Sunday Sales Permit (PM):	_____	*4032*

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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