

Request for beer/liquor license premise amendment

Corporation Name (if applicable): _____

Trade name: _____

Address of premises: _____

Name of applicant: _____

Telephone #: _____ Email address: _____

Date(s) of premises amendment: _____

Hours requested: _____

Describe proposed amendment (including dimensions):

(Attach a map of the proposed license area to this form)

Proposed event (or reason for amendment): _____

Signature of applicant

Fee: \$25.00 (non-refundable fee) per event

Fee paid: _____

Date: _____

Receipt #: _____