

# Alcoholic Beverage Permit Checklist

In addition to adhering to the “Occupational License Checklist”, applicants must also:

- ❑ Obtain an **Alcoholic Beverage Permit application** from:  
City of Thibodaux  
Tax & License, Finance Dept  
310 West 2<sup>nd</sup> St.  
Thibodaux, LA 70301  
PH.: (985) 446-7221 FAX: (985) 446-7242  
<http://ci.thibodaux.la.us>  
Download the application from the web in Adobe (\*.pdf) format.
- ❑ Have the application for Alcoholic Beverage Permit **NOTARIZED**.
- ❑ Prior to submitting application, **advertise** in the:  
“Daily Comet”  
104 Hickory St.  
Thibodaux, LA 70301  
PH: (985) 448-7606  
<http://www.dailycomet.com/>
- ❑ Obtain **Approval Letter (required attachment)** from:  
Thibodaux Police Department  
Records Division  
1309 Canal Blvd.  
Thibodaux, LA 70301  
PH: (985) 446-5021 ext 290  
E-mail: [asstchief@ci.thibodaux.la.us](mailto:asstchief@ci.thibodaux.la.us)
- ❑ Obtain a State of Louisiana Alcoholic Beverage Permit from:  
The Office of Alcohol & Tobacco Control  
8585 Archives Ave Ste 220  
Baton Rouge, LA 70809  
PH: (225) 925-4041  
<http://www.atc.rev.state.la.us/>

**It is the applicant’s responsibility to check with the above authorities on the necessity for additional permits & licenses.**



**CITY OF THIBODAUX**  
**TAX & LICENSE, FINANCE DEPT**  
**P.O. BOX 5418**  
**THIBODAUX, LA 70302**

**APPLICATION FOR**  
**RETAIL ALCOHOLIC BEVERAGE PERMIT**

**THIS APPLICATION MUST BE NOTARIZED!**

**INSTRUCTIONS: APPLICATION MUST BE COMPLETED WITH PROPER FEES ATTACHED. PLEASE TYPE OR PRINT IN INK.**

OWNER'S NAME (Name of individual, partners or corporation)		TRADE NAME	
MAILING ADDRESS	P.O. BOX NO.	STREET OR RURAL LOCATION	CITY/STATE ZIP
LOCATION ADDRESS	STREET NO.	STREET NAME	CITY/STATE ZIP
1. TYPE OF OWNERSHIP <input type="checkbox"/> PARTNERSHIP <input type="checkbox"/> INDIVIDUAL <input type="checkbox"/> CORPORATION		2. IS THE APPLICANT OWNER OF PREMISES TO BE OCCUPIED <input type="checkbox"/> YES <input type="checkbox"/> NO	
4. IF PREMISES LEASED, GIVE NAME AND ADDRESS OF LESSOR		3. IF NO, DOES APPLICANT HOLD BONA FIDE WRITTEN LEASE? <input type="checkbox"/> YES <input type="checkbox"/> NO	
5. DESCRIBE PART OF BUILDING TO BE OCCUPIED BY BUSINESS		NAME ADDRESS	
IF PARTNERSHIP OR CORPORATION, LIST NAMES, CORPORATE TITLES, AND PERCENTAGE OF BUSINESS OWNED BY EACH PARTNER OR STOCKHOLDER BELOW. SCHEDULE "A" MUST BE ATTACHED FOR EACH PARTNER, OR STOCKHOLDER OWNING MORE THAN 5% OF THE STOCK. ALSO, ANY FINANCIAL BACKERS OF THE BUSINESS MUST BE LISTED AND SCHEDULE "A" MUST BE SUBMITTED. SCHEDULE "A" MUST BE ATTACHED FOR EACH CORPORATE OFFICER, ALSO.			
NAME OF PERSON	CORPORATE OFFICER TITLE	KIND OF INTEREST	% OWNED
6. IS BUSINESS TO BE CONDUCTED WHOLLY OR PARTIALLY BY ONE OR MORE MANAGERS, AGENTS OR OTHER REPRESENTATIVES? <input type="checkbox"/> YES <input type="checkbox"/> NO		IF YES, LIST NAMES HERE AND FURNISH SCHEDULE "A" ON EACH	
1	2	3	

7. A PUBLISHED NOTICE OF APPLICATION FOR A PERMIT WAS INSERTED AS FOLLOWS:

I AM (WE ARE) APPLYING TO THE OFFICE OF ALCOHOLIC BEVERAGE CONTROL OF LOUISIANA FOR A PERMIT TO SELL BEVERAGES OF LOW AND OR HIGH ALCOHOLIC CONTENT AT RETAIL AT THE FOLLOWING ADDRESS.

ADDRESS	IN THE PARISH OF
NAME OF APPLICANT(S)	NAME OF NEWSPAPER DATES

**PLEASE COMPLETE APPLICABLE SQUARE(S) BELOW**

<b>BEER</b> TO BE ISSUED FOR FISCAL YEAR ENDING DEC. 31, _____ DATE SALES OF BEER WILL START AT THIS ADDRESS _____ DATE _____ APPLICATION IS FOR A BEER PERMIT AS A <input type="checkbox"/> CLASS A - RETAIL OUTLET <input type="checkbox"/> CLASS B - RETAIL PACKAGE FEE _____ PENALTY _____ TOTAL _____	<b>LIQUOR</b> TO BE ISSUED FOR FISCAL YEAR ENDING DEC. 31, _____ DATE SALES OF LIQUOR WILL START AT THIS ADDRESS _____ DATE _____ APPLICATION IS FOR A LIQUOR PERMIT AS A <input type="checkbox"/> CLASS A - RETAIL OUTLET <input type="checkbox"/> CLASS B - RETAIL PACKAGE FEE _____ PENALTY _____ TOTAL _____
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IS THIS APPLICATION BY A NEW OWNER TAKING OVER A GOING BUSINESS THAT HAS BEEN SELLING BEER OR LIQUOR REGULARLY AND CONTINUOUSLY TO THE PRESENT TIME? <input type="checkbox"/> YES <input type="checkbox"/> NO		IF YES, SHOW NAME OF IMMEDIATE PRIOR OWNER	
TRADE NAME		PERMIT NO.	
<b>SCHEDULE A - TO BE ANSWERED BY OWNER, PARTNER, AGENT, OR OFFICIALS SIGNING THIS APPLICATION</b>			
YOUR NAME		RESIDENCE ADDRESS	
DRIVER'S LICENSE NO.	SOCIAL SECURITY NO.	DATE OF BIRTH	PLACE OF BIRTH
SEX <input type="checkbox"/> MALE <input type="checkbox"/> FEMALE	ARE YOU A CITIZEN OF THE UNITED STATES? <input type="checkbox"/> YES <input type="checkbox"/> NO	ARE YOU A CITIZEN OF LOUISIANA? <input type="checkbox"/> YES <input type="checkbox"/> NO	ARE YOU OVER 18 YEARS OF AGE? <input type="checkbox"/> YES <input type="checkbox"/> NO
RACE	HOW DID YOU BECOME A CITIZEN?	HAVE YOU RESIDED IN LOUISIANA CONTINUOUSLY FOR A PERIOD NOT LESS THAN 2 YEARS NEXT PRECEEDING DATE OF FILING THIS APPLICATION? <input type="checkbox"/> YES <input type="checkbox"/> NO	
HAVE YOU EVER BEEN CONVICTED OF A FELONY UNDER THE LAWS OF THE UNITED STATES, LOUISIANA OR ANY OTHER STATE? <input type="checkbox"/> YES <input type="checkbox"/> NO			
HAVE YOU EVER BEEN CONVICTED IN THE UNITED STATES, LOUISIANA OR ANY OTHER STATE OF SOLICITING FOR PROSTITUTION, PANDERING, LETTING PERMISES FOR PROSTITUTION, CONTRIBUTING TO THE DELINQUENCY OF JUVENILES, KEEPING A DISORDERLY PLACE, LETTING A DISORDERLY PLACE OR DEALING IN NARCOTICS? <input type="checkbox"/> YES <input type="checkbox"/> NO			
HAVE YOU EVER HAD A LICENSE OR PERMIT TO SELL OR DEAL IN ALCOHOLIC BEVERAGES ISSUED BY THE UNITED STATES OR ANY OTHER STATE REVOKED WITHIN 5 YEARS PRIOR TO THIS APPLICATION? <input type="checkbox"/> YES <input type="checkbox"/> NO			
HAVE YOU EVER BEEN CONVICTED OR HAD JUDGEMENT AGAINST YOU INVOLVING ALCOHOLIC BEVERAGES BY THIS STATE OR ANY OTHER STATE OR THE UNITED STATES WITHIN 5 YEARS PRIOR TO THIS APPLICATION? <input type="checkbox"/> YES <input type="checkbox"/> NO			
HAVE YOU EVER BEEN CONVICTED FOR VIOLATING ANY OF THE PROVISIONS OF THE LIQUOR OR BEER LAWS OF LOUISIANA? <input type="checkbox"/> YES <input type="checkbox"/> NO		ARE YOU MARRIED? <input type="checkbox"/> YES <input type="checkbox"/> NO	IF YES, IS SPOUSE ELIGIBLE FOR A PERMIT? <input type="checkbox"/> YES <input type="checkbox"/> NO
FULL NAME OF SPOUSE	HAS YOUR SPOUSE EVER BEEN DENIED OR HAD REVOKED AN ALCOHOL BEVERAGE PERMIT? <input type="checkbox"/> YES <input type="checkbox"/> NO	DO YOU/YOUR SPOUSE HOLD INTEREST IN ANY ESTABLISHMENT HOLDING A STATE WHOLESALE BEER/LIQUOR PERMITS? IF YES, LIST <input type="checkbox"/> YES <input type="checkbox"/> NO	
PERMIT NO.	TRADE NAME	ADDRESS	TYPE INTEREST <input type="checkbox"/> % EQUITY <input type="checkbox"/>
HAVE YOU EVER USED ANY OTHER NAME THAN THE ONE GIVEN HEREIN? <input type="checkbox"/> YES <input type="checkbox"/> NO		<b>IF YES, GIVE DETAILS BELOW</b>	
NAME USED		PLACE USED	DATES FROM: TO:

**AFFIDAVIT**

THIS AFFIDAVIT MUST BE SIGNED BY OWNER, IF INDIVIDUAL OWNERSHIP; AUTHORIZED PARTNER, IF PARTNERSHIP; OR AUTHORIZED OFFICIAL, IF CORPORATE PARTNERSHIP. IT IS UNDERSTOOD ANY MISSTATEMENT OR SUPPRESSION OF FACT IN THIS APPLICATION OR ACCOMPANYING DOCUMENTS IS GROUNDS FOR DENIAL OF PERMIT.

I SWEAR (WE SWEAR) THAT I HAVE READ EACH OF THE QUESTIONS IN THIS APPLICATION AND THAT THE ANSWERS WHICH I HAVE GIVEN ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE THAT I MEET THE QUALIFICATIONS AND CONDITIONS SET OUT IN LA. R.S. 26:279 AND R.S. 26:79 AND I FURTHER SWEAR (OR AFFIRM) THAT I HAVE NO INTEREST IN ANY ESTABLISHMENT HOLDING A STATE WHOLESALE BEER OR LIQUOR PERMIT.

APPLICANT'S SIGNATURE \_\_\_\_\_ TITLE \_\_\_\_\_

SUBSCRIBED AND SWORN BEFORE ME THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, \_\_\_\_\_.

NOTARY PUBLIC \_\_\_\_\_

PERMIT FEES	BEER	LIQUOR
	CLASS A - RETAIL OUTLET..... \$35.00	CLASS A - RETAIL OUTLET..... \$125.00
	CLASS B - RETAIL PACKAGE HOUSE..... \$25.00	CLASS B - RETAIL PACKAGE HOUSE..... \$125.00
	FAILURE TO FILE APPLICATION BEFORE BEGINNING BUSINESS OR FOR RENEWAL OF PERMIT NOT LATER THAN JAN. 1ST OR EACH YEAR WILL INCUR PENALTIES, TO INCLUDE 25% OF PERMIT FEE.	A FULL YEAR IS REQUIRED IF BUSINESS STARTS PRIOR TO JULY 1, OTHERWISE ONE-HALF OF THE YEARLY RATE IS DUE. FAILURE TO FILE APPLICATION BEFORE BEGINNING BUSINESS OR FOR RENEWAL PERMIT NOT LATER THAN JANUARY 1ST OF EACH YEAR WILL INCUR PENALTIES OF 5% OF THE PERMIT FEE WITH AN ADDITIONAL 5% FOR EACH ADDITIONAL 30 DAYS OR FRACTION OF THEREAFTER.