

UNION COUNTY ALCOHOL LICENSING
BUILDING INSPECTION
AND SAFETY COMPLIANCE CONSENT FORM

All applicants for an Alcoholic Beverage License must complete this form.

Name of Applicant: _____

Location Address: _____

City _____ **State** _____ **Zip Code** _____

Phone Number _____

Type of Business:

- | | |
|--|---|
| <input type="checkbox"/> Grocery Store | <input type="checkbox"/> Restaurant |
| <input type="checkbox"/> Convenience Store | <input type="checkbox"/> Bed & Breakfast |
| <input type="checkbox"/> Wholesaler | <input type="checkbox"/> Hotel/Motel |
| <input type="checkbox"/> Farm Winery Tasting Room | <input type="checkbox"/> *Other |

*** Please explain** _____

The undersigned does hereby authorize the Union County Building and Development Department to inspect the premises prior to final approval of an alcohol license, and submit its findings to the Union County Alcohol Board.

Signature of Applicant

Date

Signed in the presence of:

Notary Public

Date

My Commission Expires

Notary Seal