

**APPLICATION FOR  
PUBLIC VENUE OR PERFORMING ARTS  
FACILITY RESTAURANT LIQUOR LICENSE**

(SEE INSTRUCTIONS PAGE 3)

**(ANSWER ALL QUESTIONS)**

The undersigned hereby applies for the following type of License: **PUBLIC VENUE RESTAURANT LIQUOR,**  
or **PERFORMING ARTS FACILITY RESTAURANT LIQUOR**

1. NAME OF APPLICANT				
2. TRADE NAME (IF ANY)		3. FACILITY/PREMISES KNOWN AS		
4. ADDRESS OF PREMISES		(STREET, RURAL ROUTE, P.O. BOX NO.)	(POST OFFICE)	(STATE) (ZIP)
5. NAME OF MUNICIPALITY	TYPE OF MUNICIPALITY		INC.	COUNTY
	CITY	BORO	TWP.	TOWN

6. DESCRIBE PRIMARY USE(S) OF FACILITY:

7. IS THE APPLICANT A CONCESSIONAIRE? YES NO

IF YES, FOR WHOM?

8. IS THE APPLICATION TO BE CONSIDERED FOR PRIOR APPROVAL? YES NO

9. HAS THE APPLICANT PREVIOUSLY FILED AN APPLICATION FOR ANY OTHER LICENSE? IF "YES", WHEN AND WHERE?

YES	NO	
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10. IS A CURRENT HEALTH LICENSE POSTED ON THE PREMISES? IF "YES", WHEN DOES IT EXPIRE? GIVE MONTH, DAY, YEAR.

YES	NO	
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11. NAME OF CURRENT OWNER OF PREMISES		DEED BOOK VOLUME NO.	PAGE NO./ INSTRUMENT NO.
ADDRESS OF CURRENT OWNER OF PREMISES			LEASE EXPIRATION DATE

11(A). NAME OF OFFICERS, DIRECTORS, SHAREHOLDERS, PARTNERS OR MEMBERS OF PROPERTY OWNER. (ATTACH SEPARATE SHEET IF NECESSARY)	TITLE

12. COMPLETE IN DETAIL - ATTACH SEPARATE SHEET, IF NECESSARY.

NAME OF INDIVIDUAL APPLICANT, PARTNERS, MEMBERS, OR OFFICERS & DIRECTORS	TITLE	HOME ADDRESS	DATE AND PLACE OF BIRTH	LENGTH OF RESIDENCE IN PA.	U.S. CITIZEN?	
					YES	NO
A. NAME						
B. NAME						
C. NAME						
D. NAME						
E. NAME						

**DO NOT WRITE BELOW THIS LINE**

CO/MNCP \_ \_ \_ \_ \_ ZIP \_ \_ \_ \_ \_

13. FOR CORPORATIONS ONLY (check one)      PROFIT      NONPROFIT

13a. LIST ALL STOCKHOLDERS - ATTACH SEPARATE SHEET, IF NECESSARY.

NAME OF STOCKHOLDER	HOME ADDRESS	DATE & PLACE OF BIRTH	U.S. CITIZEN?		NO. OF SHARES OF STOCK HELD
			YES	NO	
A. NAME					
B. NAME					
C. NAME					
D. NAME					
E. NAME					
F. NAME					

14. FOR CORPORATIONS ONLY AND LIMITED LIABILITY COMPANIES ONLY

14a. **RESOLUTION**

At a regular or special meeting held on \_\_\_\_\_, 20\_\_\_\_ by the applicant, it was resolved that said application be filed with the Pennsylvania Liquor Control Board, and that \_\_\_\_\_ and/or \_\_\_\_\_ is/are hereby  
(NAME/TITLE) (NAME/TITLE)  
authorized to execute said application, and any other papers required by the Board.

REGISTERED NAME	INCORPORATED/ORGANIZED		IF FOREIGN CORPORATION GIVE DATE OF CERTIFICATE OF AUTHORITY OR IF FOREIGN LLC GIVE DATE REGISTERED IN PA
	PLACE	DATE	

15. Is a management company employed or otherwise contracted to operate, manage, or otherwise supervise all or part of the operation?  
YES    NO    If yes, list name and address of entity:

NAME OF MANAGER	HOME ADDRESS	DATE & PLACE OF BIRTH	U.S. CITIZEN?	
			YES	NO
NAME				

17. CONVICTION RECORD: The following is a record of all felony and misdemeanor convictions of the individual owner, all partners, all members, the manager and all corporate officers, directors and stockholders. (Attach separate sheet, if necessary.)  
If there have been **no** such **convictions**, check here:    **No such convictions**

NAME	DATE OF CONVICTION	CHARGE	DISPOSITION	LOCATION OF COURT (COUNTY AND STATE)

18. Neither the applicant nor any member, officer, director, stockholder, agent or employee has any financial interest, either directly or indirectly, in any other class of license or permit issued by this Board, or in the ownership, leasehold, or equipment, of any property used by such other licensee or permittee, or mortgage lien against the same, nor have they loaned any money, or given credit, or anything of value, for equipping, maintaining or conducting an establishment used in such other license or permit, except as follows:

**No exceptions**

19. No person having any financial interest as an individual, or as a member, officer, director, stockholder, agent or employee in another class of license or permit issued by this Board will be in any manner interested, either directly or indirectly, in the business proposed to be licensed under this application, or in the ownership or leasehold of the property or equipment to be used in the operation of the said business, or any mortgage lien against the same, nor have they loaned any money, or given credit, or anything of value, to the applicant, or any officer, director, stockholder, servant, agent or employee of said applicant, for equipping, maintaining or conducting this business, except as follows:

**No exceptions**



### APPLICATION FOR PUBLIC VENUE OR PERFORMING ARTS FACILITY RESTAURANT LIQUOR LICENSE

(SEE INSTRUCTIONS ON PAGE 3)

20. None of the applicants hold any public office involving the enforcement of penal laws, or penal ordinances or resolutions, except as follows:

**No exceptions**

**21. PREMISES TO BE LICENSED**

A. LIST COMPLETE INFORMATION FOR EVERY AREA WHICH IS TO BE USED IN THE OPERATION OF THE LICENSED BUSINESS, INCLUDING A SEPARATE KITCHEN, IF ANY, ANY AREA TO BE USED FOR STORAGE OF ALCOHOLIC BEVERAGES, RESTAURANT FACILITIES AND CLUB SEATS. ATTACH SEPARATE SHEET, IF NECESSARY.

ROOM/AREA		LOCATED ON WHAT FLOOR/LEVEL	SEATING CAPACITY	PUBLIC VENUE APPLICANTS ALCOHOLIC BEVERAGES SOLD? CHECK ALL THAT APPLY		DESIGNATE USE: SERVING, KITCHEN OR STORAGE, PUBLIC SEATING, CLUB SEATING
WIDTH	LENGTH			LIQUOR	MALT BEVERAGE	

B. TOTAL SEATING CAPACITY

C. OCCUPANCY OF REMAINDER OF BUILDING

22. No other type of business licensed by the Liquor Control Board is conducted in the building, except as follows:

**No exceptions**

23. List name(s) and LID numbers of any other concessionaire(s) operating in the facility

**No other concessionaire(s)**

24. For Performing Arts Facility Applicants Only

A placard, PLCB-1296, Public Notice of Application Alcoholic Beverages, was posted on (DATE) \_\_\_\_\_ in a conspicuous place on the outside of the premises as required by the Liquor Code and Regulations of the Board, and will remain posted until a notice of approval or refusal is received by the applicant.

I swear or affirm, subject to the penalties provided by 18 Pa. C.S. §4904 and 47 P.S. §4-403(h) and/or §4-436(j), that the foregoing answers and statements provided herein are true and complete to the best of my knowledge and belief.

SIGNATURE	TITLE	NAME OF ATTORNEY REPRESENTING YOU IN THIS MATTER, IF ANY
HOME ADDRESS	PHONE	ADDRESS
SIGNATURE	TITLE	
HOME ADDRESS	PHONE	PHONE
PREMISES PHONE NO.		DATE SIGNED
E-MAIL ADDRESS		



**INSTRUCTIONS**

The enclosed forms are to be submitted to apply for a new public venue restaurant liquor or performing arts facility restaurant liquor license. All attached separate sheets must include the applicant's name and the address of the establishment. Fees and documents to be submitted include:

1. Application PLCB-2217.
2. PLCB-1773, Appendix Social Security Information, **MUST** be submitted showing the social security number(s), name(s), and title(s) of each individual applicant, partner, member, manager and each officer, director and stockholder.
3. FEES - The fees for a new public venue license are \$700.00 application filing fee AND \$700.00 license fee; while the fees for a new performing arts license are \$700.00 application filing fee AND \$675.00 license fee. Remittances to be made payable to "PLCB" or "Commonwealth of PA."

Amusement, Sunday sales, and extended hours food permits are not applicable. Therefore, permit fees are not required.

4. PLCB-1898, Tax Certification Statement, for the applicant.  
PLCB-1898A, Tax Certification Statement for Management Company, is also required if a management company (any entity employed or otherwise contracted by the licensee or the applicant to operate, manage or supervise all or part of the operation of the licensed premises) is utilized.
5. PLCB-2018, Request for Criminal Record Check, **MUST** be submitted for each individual applicant, all partners, all members, officer, director, stockholder, and manager with a \$10.00 remittance per form.
6. Recent, individual photographs of each individual applicant, partner, member, manager or if a corporation, of each of the principal officers 1½" x 1½" in size, identified with the individual's name, and applicant's name and address of the premises on the reverse. Photographs must have a matte finish.
7. Floor plans, 8½" x 11" in size, depicting the room dimensions. A separate floor plan must be submitted for each floor/level to be licensed. Each plan must be clear and readable.
8. Recent, premises photographs, 4" x 6" in size, of the exterior of the premises and of the main interior serving room, showing tables and chairs, with the applicant's name and address of the premises on the reverse. Photographs must have a matte finish.
9. Owner of premises name, address, principals and their titles must be listed.

**INFORMATION**

Facilities to be licensed by **public venue restaurant liquor licenses** include stadiums, arenas, convention centers, museums, zoos, amphitheatres or similar structures. Such facilities may be used for athletic performances, performing arts events, trade shows and conventions, and banquets; however, facilities used for interscholastic athletic events or for holding automobile or horse races do not qualify.

Facilities to be licensed by **performing arts facility restaurant liquor licenses** include structures as described above. Facilities are used primarily as halls or theaters in which live musical, concert, dance, ballet and legitimate play book-length productions are performed. Facilities used primarily for athletic events should obtain a public venue license even if some performing arts functions occur at the premises.

An application for new license may be filed for "PRIOR APPROVAL" of planned alterations or construction. Submit a site plan clearly showing the premises proposed to be licensed, as it will be upon completion of the alterations or construction of the building. Site plans must be on 8½" x 11" paper depicting the location of the proposed premises in relationship to identifiable lines or easily identifiable landmarks or reference points with measurements to the property lines, landmarks or reference points. The plan must be clear and readable.

**DO NOT SUBMIT ANY OTHER DOCUMENT (E.G.; LEASE, AGREEMENT) WITH THIS APPLICATION PACKET. SHOULD YOU BE REQUIRED TO SUBMIT SUCH DOCUMENTATION, OTHER THAN FOR THE INVESTIGATION OFFICER'S REVIEW, YOU WILL BE NOTIFIED IN WRITING.**

**IF YOU REQUIRE ASSISTANCE IN COMPLETING THE APPLICATION PACKET, CALL THE LICENSING INFORMATION CENTER AT (717) 783-8250, OR DIRECT EMAIL TO: [ra\\_iblicensing@pa.gov](mailto:ra_iblicensing@pa.gov)**

**SEND THE APPLICATION PACKET TO: PENNSYLVANIA LIQUOR CONTROL BOARD, BUREAU OF LICENSING, P.O. BOX 8940, HARRISBURG, PA 17105-8940.**

