Alcohol License Premises Amendment Request Form CASH OR CHECK ONLY!



Please allow 4 weeks for application processing

FEES ARE NON-REFUNDABL	E · .
	Date Recv'd 6 3 24
License Fee - \$10.00/event	Total \$
(CLCAGP)	Receipt #: 6932 - 1

SECTION 1 – ESTABL	ISHMENT IN	IFORMA	ATION				
Name of Establishment				Establishment Phone N			
Spats				925 - 738	:- 71V (
Address of Establishmer	tollege	Au	e				
Agent Name	Kapledi	~		Agent Phone Number	Required) イしんじ		
			A drawing/diagram of th	ne proposed area must be sub	mitted with this applic	cation"	
SECTION 2 – PREMISES AMENDMENT - A drawing/diagram of the proposed area must be submitted with this application states and the proposed area must be submitted with this application and the proposed area must be submitted with this application and the proposed area must be submitted with this application and the proposed area must be submitted with this application.							
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<u>If temporary</u> , please spe	cify the reasc	on for the	amendment:	(1'e) Event			
	4ll-4-7-\			onder out will be detilized.	1/24-	8/4/24	
If temporary, please list	the date(s) ar	If temporary, please list the date(s) and time(s) that this premises amendment will be utilized:					
	Press Cont. 3 at 27 N N N N A C T N N 1 4 4 5 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						
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Spots 2024 mile of misic Parking Lot

