



**Town of Cutler Bay**  
 Department of Planning & Zoning  
 10720 Caribbean Blvd., Suite 110  
 Cutler Bay, Florida 33189  
 (305)234-4262 Office (305)234-4251 Fax

## Application for Certificate of Use for Liquor/Beer and/or Wine

### New Business Information

Business Address: \_\_\_\_\_ Suite: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ Suite: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Name of Business/DBA (Doing Business As): \_\_\_\_\_

Name of Corporation: \_\_\_\_\_

### Corporate Officer/Business Owner

Name: \_\_\_\_\_

Business Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

### Location Information

Size of Space (sq. ft.): \_\_\_\_\_ Alcohol Type(s): \_\_\_\_\_ Liquor \_\_\_\_\_ Wine \_\_\_\_\_ Beer

Building Type:  Grocery Store  Bar  Package Store  Cabaret  Restaurant  Lounge  Night Club  
 Other Explain: \_\_\_\_\_

Will you be sharing space with another business?  Yes  No Comments: \_\_\_\_\_

Will used merchandise be sold on the property?  Yes  No Comments: \_\_\_\_\_

Describe the type of business: \_\_\_\_\_

Signature of applicant verifies the above information is true and correct. I understand the conditions under which my Certificate of Use (CU) is being approved and accept that no charges or refunds can be made once issued. I am authorized to sign for the business and understand that any misrepresentation of information on this application may result in the revocation of the CU and/or possible enforcement action being initiated against the business and/or its authorized representatives. I further understand that a separate Certificate of Occupancy (CO) is also required and is obtainable from the Building Department.

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_

### Office Use Only

Zoning: \_\_\_\_\_ Processor: \_\_\_\_\_

Conditions under which approved: \_\_\_\_\_

Resolutions: \_\_\_\_\_

Processing Number: \_\_\_\_\_