

# Resort Alternate Alcoholic Beverage Storage Facility Request

Alt Storage V1 7/2021

## **Section 1–General Information**

Name of Licensee			
License Number			
Business Name			
Contact Name			
Daytime Telephone			
Email Address			
Physical Address o	f		
·	(Street Address, City, State, and ZIP Code)		
Mailing Address			
Mailing Address	(Street Address, City, State, and ZIP Code)		
Section 2-Required F	ees		
Application Fee	\$100		
Section 3–Alternate Alcoholic Beverage Storage Facility Details  If your resort area has two or more resort retail all-beverage licenses or retail all-beverage licenses within the boundaries of the resort area, those licensees may also apply separately to use the resort alternate alcoholic beverage storage facility, which must be located within the resort area. The resort alternate alcoholic beverage storage facility will be considered part of each licensee's existing licensed premises, though it does not need to be contiguous to qualify for approval. Alcoholic beverages in sealed containers belonging to multiple licensees within the resort area may be stored in the same resort alternate alcoholic beverage storage facility once the licensees have been approved to use it. A resort all-beverage licensee or retail all-beverage licensee who is approved to use the resort alternate alcoholic beverage storage facility may accept delivery of alcoholic beverages at the resort alternate alcoholic beverage storage facility and may transfer alcoholic beverages to another licensee approved to use the resort alternate alcoholic beverage storage facility. Any transfer of alcoholic beverages between approved licensees must be properly accounted for.  Is the resort alternate alcoholic beverage storage facility located within the boundaries of the resort area?			
Physical Address of the	ne proposed resort alternate		
alcoholic beverage st	orage facility  (Street Address, City, State, and ZIP Code)		
use this resort altern to this facility?	es who have been approved to use or who are applying for approval to ate alcoholic beverage storage facility, will anyone else have access	Yes	No
	r what purpose?	Yes	
If yes, will they have access to the area where alcoholic beverages are stored?			∐ No

#### Resort Alternate Alcoholic Beverage Storage Facility Request (Continued)

#### Section 4-Other Approved Licensees using the Resort Alternate Alcoholic Beverage Storage Facility

If applicable, please list the License Numbers and Names for all licensees that have been approved to utilize the shared alternate storage area

License Number	Name
<u> </u>	
<b>—————</b>	
m-m	
m-m-m-	
m-m-m-	
TT-TTT-TTT-	
m-m-m-	

#### **Section 5–Required Documents**

- Current floor plan of your licensed premises
- Proposed floor plan including resort alternate alcoholic beverage storage facility
- Proof of possessory interest in the resort alternate alcoholic beverage storage facility
- Local building, health, and fire approvals for the resort alternate alcoholic beverage storage facility
- Any additional documentation needed for the department to make a determination

#### Section 6-Termination of Resort Alternate Alcoholic Beverage Storage Facility

If you choose to stop using the resort alternate alcoholic beverage storage facility, you must notify the department by submitting an alteration request form to remove that area from your licensed premises.

#### Resort Alternate Alcoholic Beverage Storage Facility Request (Continued)

Printed Name

# this application, and that the responses provided, including any accompanying information, are true, correct, and complete. Signature Date

I declare under penalty of false swearing that I am the applicant or the duly authorized representative of the entity making

### Mail completed form to:

Department of Revenue Alcoholic Beverage Control Division PO Box 1712 Helena, MT 59624-1712

Section 7-Declaration and Affidavit

Questions? Call us at (406) 444-6900, Montana Relay at 711 for the hearing impaired, Fax: (406) 444-0722

Title