

**LICENSED PREMISES DIAGRAM**

1. Applicant Name(s) (If an individual: first name, middle name, last name. If a corporation, limited partnership, or limited liability company: name of entity)

2. License Type(s)

3. Premises Address (Street number and name, city, zip code)

4. Is Any Part of The Licensed Premises Located in A Private Residence?

Yes       No

5. Diagram: The diagram below is a true and correct description of the entrances, exits, interior walls and exterior boundaries of the premises to be licensed, including dimensions and identification of each room (i.e., "kitchen", "production area", "storage", "office", etc.). Provide entire floorplan if the licensed premises is located within a private residence. **The area to be licensed must be outlined in red.**

It is hereby declared that the above-described premises will not be changed in accordance with Rule 64.2 of the California Code of Regulations without first notifying and securing written approval of the Department of Alcoholic Beverage Control. Substantial changes to the premises may require an application fee in accordance with Section 24072 of the Business and Professions Code. I declare under penalty of perjury that the foregoing is true and correct.

Applicant Signature (only one signature required)

Applicant Printed Name

Date Signed

**FOR ABC USE ONLY**

Certified Correct (signature)

Printed Name

Inspection Date