

# ZONING AFFIDAVIT

*Instructions to the Applicant: Complete Items 1 - 14. Sign and date the form and submit it to ABC.*

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| 1. APPLICANT(S) NAME (Last, first, middle)                           |   |   |
| 2. PREMISES ADDRESS (Street number and name, city, zip code)         |   | 3. PARCEL NUMBER OF PROPERTY (Obtain from County Assessor's Office)                 |
| 4. TYPE OF LICENSE APPLIED FOR                                       | 5. UPGRADE OF LICENSED PRIVILEGES<br><input type="checkbox"/> Yes <input type="checkbox"/> No | 6. CURRENT LICENSE TYPE AT THIS LOCATION, IF ANY                                    |
| 7. TYPE OF BUSINESS (i.e., restaurant, mini-mart, gas station, etc.) |   | 8. ARE THE PREMISES INSIDE THE CITY LIMITS?<br><input type="checkbox"/> Yes      No |

*For answers to Questions 8 - 14, contact your local city OR county planning department (if inside the city limits, contact city planning; if outside, contact county planning.*

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| 9. HOW ARE APPLICANT PREMISES ZONED? STATE TYPE (i.e., "C" commercial, "R" residential, etc.)    |   |   |
| 10. DOES ZONING PERMIT INTENDED USE?<br><input type="checkbox"/> Yes <input type="checkbox"/> No | 11. IS A CONDITIONAL USE PERMIT (C.U.P.) NEEDED?<br>(If yes, please attach copy of receipt or C.U.P.)<br><input type="checkbox"/> Yes <input type="checkbox"/> No | 12. IF YES, DATE YOU FILED APPLICATION FOR C.U.P. |
| 13. NAME OF PLANNER CONTACTED AT PLANNING DEPARTMENT   |   | 14. PLANNER'S PHONE NUMBER                        |

Under the penalty of perjury, I declare the information in this affidavit is true to the best of my knowledge.

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| 15. APPLICANT'S SIGNATURE (One signature will suffice) | 16. DATE SIGNED |
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### FOR DEPARTMENT USE ONLY

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|--|-----------------------------|-------------|
| <input type="checkbox"/> C.U.P. Approved | IF APPROVED, EFFECTIVE DATE | FILE NUMBER |
| <input type="checkbox"/> C.U.P. Denied   | DATE DENIED                 |             |

### GENERAL INFORMATION

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| <p>•Section 23790 of the Business and Professions Code says that ABC may not issue a retail license contrary to a valid zoning ordinance. This form will help us determine whether your proposed business is properly zoned for alcoholic beverage sales.</p> <p>•A conditional use permit (CUP) (Item 11) is a special zoning permit granted after an individual review of proposed land-use has been made. CUP's are used in situations where the proposed use may create hardships or hazards to neighbors and other community members who are likely to be affected by the proposed use. The ABC district office will not make a final recommendation on your license application until after the local CUP review process has been completed. If the local government denies the CUP, ABC must deny your license application.</p> <p><b>23790. Zoning ordinances.</b> No retail license shall be issued for any premises which are located in any territory where the exercise of the rights and privileges conferred by the license is contrary to a valid zoning ordinance of any county or city.</p> | <p>Premises which had been used in the exercise of those rights and privileges at a time prior to the effective date of the zoning ordinance may continue operation under the following conditions:</p> <p>(a) The premises retain the same type of retail liquor license within a license classification.</p> <p>(b) The licensed premises are operated continuously without substantial change in mode or character of operation.</p> <p>For purposes of this subdivision, a break in continuous operation does not include:</p> <p>(1) A closure for not more than 30 days for purposes of repair, if that repair does not change the nature of the licensed premises and does not increase the square footage of the business used for the sale of alcoholic beverages.</p> <p>(2) The closure for restoration of premises rendered totally or partially inaccessible by an act of God or a toxic accident, if the restoration does not increase the square footage of the business used for the sale of alcoholic beverages.</p> |
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