

LIQUOR LICENSE APPLICATION DOCUMENTS CHECK LIST

NEW LICENSE APPLICATIONS	TRANSFER APPLICATIONS
<input type="checkbox"/> LETTER OF AUTHORIZATION (IF NOT AN ATTORNEY)	<input type="checkbox"/> LETTER OF AUTHORIZATION (IF NOT AN ATTORNEY)
<input type="checkbox"/> APPLICATION NOTARIZED	<input type="checkbox"/> APPLICATION NOTARIZED
<input type="checkbox"/> CORPORATION: ARTICLES OF INCORPORATION <input type="checkbox"/> PARTNERSHIP: PARTNERSHIP AGREEMENT <input type="checkbox"/> LLC: ARTICLES OF ORGANIZATION & OPERATING AGREEMENT	<input type="checkbox"/> CORPORATION: ARTICLES OF INCORPORATION <input type="checkbox"/> PARTNERSHIP: PARTNERSHIP AGREEMENT <input type="checkbox"/> LLC: ARTICLES OF ORGANIZATION & OPERATING AGREEMENT
<input type="checkbox"/> CERTIFICATE OF GOOD STANDING (CORP/PARTNERSHIP/LLC) - www.hawaii.gov NOT OVER 6 MONTHS OLD	<input type="checkbox"/> CERTIFICATE OF GOOD STANDING (CORP/PARTNERSHIP/LLC) - www.hawaii.gov NOT OVER 6 MONTHS OLD
<input type="checkbox"/> CERTIFICATE OF TRADE NAME (Form T-1) or ASSIGNMENT OF TRADE NAME (Form T-4) - IF NOT CORPORATE OR LLC NAME www.hawaii.gov	<input type="checkbox"/> CERTIFICATE OF TRADE NAME (Form T-1) or ASSIGNMENT OF TRADE NAME (Form T-4) - IF NOT CORPORATE OR LLC NAME www.hawaii.gov
<input type="checkbox"/> FINANCIAL STATEMENT - NOT OVER 1 YEAR OLD	<input type="checkbox"/> FINANCIAL STATEMENT - NOT OVER 1 YEAR OLD
<input type="checkbox"/> VERIFICATION OF FUNDS (ORIGINAL LETTER FROM THE BANK, COPIES OF BANK STATEMENTS OR LOAN DOCUMENTATION).	<input type="checkbox"/> VERIFICATION OF FUNDS (ORIGINAL LETTER FROM THE BANK, COPIES OF BANK STATEMENTS OR LOAN DOCUMENTATION).
<input type="checkbox"/> PERSONAL HISTORY AND AFFIDAVIT (OF ALL OFFICERS, DIRECTORS, 25%+ STOCKHOLDERS. MEMBER(S) OF MEMBER-MANAGED LLC, MANAGER(S) & MEMBER(S) OF MANAGER-MANAGED LLC)	<input type="checkbox"/> PERSONAL HISTORY AND AFFIDAVIT (OF ALL OFFICERS, DIRECTORS, 25%+ STOCKHOLDERS. MEMBER(S) OF MEMBER-MANAGED LLC, MANAGER(S) & MEMBER(S) OF MANAGER-MANAGED LLC)
<input type="checkbox"/> CRIMINAL CLEARANCE (OF ALL OFFICERS DIRECTORS, 25%+ STOCKHOLDERS, MEMBER(S) OF MEMBER-MANAGED LLC, MANAGER(S) & MEMBER(S) OF MANAGER-MANAGED LLC) • FILE SIGNED DATED ORIGINAL LETTER OF AFFIRMATION.	<input type="checkbox"/> CRIMINAL CLEARANCE (OF ALL OFFICERS DIRECTORS, 25%+ STOCKHOLDERS, MEMBER(S) OF MEMBER-MANAGED LLC, MANAGER(S) & MEMBER(S) OF MANAGER-MANAGED LLC) • FILE SIGNED DATED ORIGINAL LETTER OF AFFIRMATION.
<input type="checkbox"/> FLOOR PLAN TO SCALE (i.e. 1/8"=1', 1/4"=1') † <input type="checkbox"/> 8 1/2" x 11" REDUCTION NOTE: PROPOSED LICENSED AREA OUTLINED IN RED	<input type="checkbox"/> FLOOR PLAN TO SCALE (i.e. 1/8"=1', 1/4"=1') † <input type="checkbox"/> 8 1/2" x 11" REDUCTION NOTE: LICENSED AREA OUTLINED IN RED
<input type="checkbox"/> COPY OF LEASE AGREEMENT OR CONVEYANCE OF THE USE OF THE PROPERTY.	<input type="checkbox"/> COPY OF ASSIGNMENT OF LEASE & CONSENT OR CONVEYANCE OF THE USE OF THE PROPERTY.
<input type="checkbox"/> 4" x 6" PHOTO OF FRONTAGE OF PROPOSED PREMISE MOUNTED OR PRINTED ON 8 1/2" x 11"	<input type="checkbox"/> 4" x 6" PHOTO OF FRONTAGE OF PROPOSED PREMISE MOUNTED OR PRINTED ON 8 1/2" x 11"
<input type="checkbox"/> VOTER LIST †† OFFICE OF THE CITY CLERK CITY HALL, 530 S. KING ST. RM. 300 HONOLULU, HI 96813 PH: 768-3800	<input type="checkbox"/> VOTER LIST †† OFFICE OF THE CITY CLERK CITY HALL, 530 S. KING ST. RM. 300 HONOLULU, HI 96813 PH: 768-3800
<input type="checkbox"/> ZONING CLEARANCE ††	<input type="checkbox"/> ZONING CLEARANCE ††
	<input type="checkbox"/> CONSIDERATION DOCUMENT - DEPOSIT RECEIPT OFFER ACCEPTANCE (DROA), AGREEMENT, AGREEMENT OF SALE, BILL OF SALE, ETC.
<input type="checkbox"/> TAX MAP <input type="checkbox"/> LIST OF PROPERTY OWNERS AND LESSEES <input type="checkbox"/> LIST OF SMALL BUSINESSES †††	FOR TRANSFER OF DISPENSER & CABARET CLASSES ONLY <input type="checkbox"/> TAX MAP <input type="checkbox"/> LIST OF PROPERTY OWNERS, LESSEES AND SMALL BUSINESSES
<input type="checkbox"/> COPY OF \$1 MILLION DOLLAR LIQUOR LIABILITY INSURANCE CERTIFICATE	<input type="checkbox"/> COPIES OF \$1 MILLION DOLLAR LIQUOR LIABILITY INSURANCE CERTIFICATES FROM TRANSFEROR (SELLER) AND TRANSFEREE (BUYER)
NOTE: ANY APPLICATION THAT IS INACCURATE OR NOT COMPLETE WILL BE RETURNED. The application can be accepted for processing when the application uses the corporate or company name for the DBA. All others will submit a Certificate of Trade Name at the time of filing. The application WILL NOT BE ACCEPTED without this certificate. PLEASE VISIT THE LIQUOR COMMISSION WEBSITE FOR MORE INFORMATION: www.honolulu.gov/liq	FF = FILING FEE / PC = PUBLICATION COSTS NEW LICENSE APPLICATIONS: <div style="border: 1px solid black; padding: 2px; margin: 5px 0;">\$250. FF + \$2,000. PC = \$2,250.</div> TRANSFER APPLICATIONS: <div style="border: 1px solid black; padding: 2px; margin: 5px 0;">DISPENSER/CABARET: \$250. FF + \$2,000. PC = \$2,250.</div> <div style="border: 1px solid black; padding: 2px; margin: 5px 0;">ALL OTHERS: \$250. FF + \$500. PC = \$750.</div> PAYMENT WITH CASHIER'S CHECK, MONEY ORDER MADE PAYABLE TO THE CITY & COUNTY OF HONOLULU, MASTERCARD/VISA OR CASH

† MUST HAVE PRELIMINARY HAWAII STATE DEPARTMENT OF HEALTH STAMP FOR ON PREMISE CONSUMPTION ONLY. (SANITATION BRANCH - 586-8000 • 591 Ala Moana Boulevard)

†† APPLICANT MAY PROVIDE A STATEMENT OF AFFIRMATION THAT EACH REQUEST HAS BEEN MADE WITH THE DATE IT WAS MADE, UPON SUBMISSION OF THE APPLICATION.

††† HOTEL, RESTAURANT & RETAIL STORE EXEMPT FROM SUBMITTING LIST OF SMALL BUSINESSES.