

TOWN OF CUMBERLAND – OFFICE OF THE TOWN CLERK
45 BROAD STREET, CUMBERLAND RI 02864
(401)728-2400 FAX (401)724-1103

NON-TRANSFERABLE CLASS B LICENSE APPLICATION

Application fee--\$2,000

Renewal Fee: License Fee \$2,000

Non-refundable application fee--\$100

Advertising Fee-\$100

Advertising fee--\$375

The Town Council may, in its discretion, issue full and limited Class B licenses which may not be transferred to another person or entity, or to another location, but which shall revert to the Town of Cumberland if not renewed by the holder. Below is a list of qualifying factors that the Town Council will consider when reviewing applications:

- Food sales will exceed alcohol sales
- Proposed location is targeted for commercial development
- Promotes revitalization of area
- Substantial employment opportunities
- Unique concept not currently existing in Cumberland
- General promotion of economic development

Any Holder of a non-transferable Class B liquor license shall be allowed to conduct business on a daily basis not later than 1:00 a.m.

The following must be submitted with the Application:

- (1) Completed Liquor License Application;
- (2) Completed Victualling House License and fee;
- (3) State Liquor License Application;
- (4) Department of Health forms;
- (5) Tentative menu;
- (6) Sales Permit Tax Identification Number;
- (7) Alcohol server certification for all employees;
- (8) Plot Plan; and
- (9) Abutters List and Map—200 ft. radius of building with owners' names, address, and plat and lot number.

All of the above must be submitted at least one week prior to the next meeting of the Board of License Commissioners, which meets on the first Wednesday of each month. At that time the Board will review the Application and set the matter down for public hearing. A fire inspection must be completed prior to final license approval.

Please note: A BCI check will be run by the Cumberland Police Department on all owners.

All Liquor Licenses expire every year on November 30th no matter what the application date may be.

BUSINESS INFORMATION:

License Number _____ Tax ID Number _____

Business Name _____

DBA Name, if applicable _____

Business Type: _____ Corporation _____ Partnership _____ Individual _____ LLC

Business Address _____

Assessor's Plat _____ Lot(s) _____ Zone _____

Business Mailing Address, if different _____

Business Phone Number _____

Business Fax Number _____

Property Owner Name and Address _____

BUSINESS OWNER #1 INFORMATION:

Business Owner Name

Owner Home Address

Home Phone Number

Cell Phone Number

E-Mail

Owner Date of Birth

Place of Birth

BUSINESS OWNER #2 INFORMATION:

Check if additional owners and attach separate sheet

Business Owner Name

Owner Home Address

Home Phone Number

Cell Phone Number

E-Mail

Owner Date of Birth

Place of Birth

CONTACT PERSON INFORMATION:

Contact Person Name, Address, and Phone Number (if different from Owner)

Contact Person Fax

Cell Phone

E-mail

All applicants shall execute a written acknowledgement that he/she has read and is familiar with all rules, regulations and laws pertaining to alcoholic beverage licenses.

Date: _____

OWNER #1 SIGNATURE

Date: _____

OWNER #2 SIGNATURE

TOWN CLERK

DATE GRANTED: _____