



TEXAS ALCOHOLIC BEVERAGE COMMISSION

Texans Helping Businesses & Protecting Communities

LOCATION PACKET FOR REPORTING CHANGES FOR RETAILERS

L-LRC (8/2020)

Utilize this packet to report changes about your license/permit. All applicants complete questions 1 through 8. To report information that has changed since your last filed L-L or L-LRC application, check and complete the appropriate questions 9 through 22.

DO NOT USE THIS FORM for change of license/permit location, use form L-ON or L-OFF.

If adding a subordinate license/permit, submit correct fees. See fee chart on our website: Fees and Surcharges

1. Current License/Permit No.
2. Trade Name of Location as on Current License/Permit
3. Location Address as on Current License/Permit
4. Owner of Business as on Current License/Permit
5. Federal Employer Identification No. (FEIN)
6. Phone No.
7. Email Address:

INITIAL INFORMATION

8. Have there been any changes in the ownership or structure of the business since the last application was filed? Yes No

If YES, complete the Business Packet for Reporting Changes (L-BRC).

CHECK AND COMPLETE ONLY THE SECTION(S) THAT APPLY TO YOUR CHANGE THEN PROCEED TO THE WARNING AND SIGNATURE SECTION.

If adding a Local Cartage Permit (E) or Private Carrier's Permit (O) attach Vehicles - Transporting Alcohol Form L-VEH.

9. Change Trade Name of Location
10. Change Mailing Address City State Zip Code
11. Add Subordinate PE Beverage Cartage Permit LP Local Distributor's Permit CB Caterer's Permit PS Package Store Tasting Permit MI Minibar Permit FB Food and Beverage Certificate E Local Cartage Permit (P, Q, BG only) BP Brewpub License O Private Carrier's Permit (BG with a Brewpub (BP) only)

BREW PUB (BP) Only

12. Do you, the applicant, intend to sell your alcoholic product directly to other retailers? Yes No
13. Do you, the applicant, intend to sell your alcoholic product to wholesalers/distributors? Yes No

LICENSED PREMISE DIAGRAM

14. Change Diagram of Licensed Premise
Will the license or permit embrace the entire building and grounds at the address shown in question #3? If NO, attach the required diagram. Yes No
An inspection may be required prior to approval.

**LOCATION ADDRESS INFORMATION FOR  
OWNERSHIP/LEASE/SUBLEASE/MANAGEMENT INFORMATION**

**15.  Change Owner of Premise**

Does the applicant own the land and building at this proposed licensed location?  Yes  No  
If “**NO**,” complete **Owner of Property (L-OP)** and any question that applies (16 through 20).  
**NOTE:** Be prepared to provide additional information (such as a copy of your lease) if requested.

**16.  Change Lease Information**

Expiration date(s)/Options \_\_\_\_\_  
Monthly rental amount \$ \_\_\_\_\_  
Other fees and payments to landlord \_\_\_\_\_

**17.  Change Concession, Service or Management Agreement Information**

Are you operating under any concession, service or management agreements that contain terms for services or management beyond property rental?  Yes  No  
If “**YES**,” complete **Sublessor (L-SL)**, indicate the following, and attach copy of agreement(s):  
Expiration date(s)/Options \_\_\_\_\_  
Monthly fee \$ \_\_\_\_\_  
If you have a sublessor that differs from the management company enter sublessor name below **and** complete Form L-SL.  
Sublessor Name \_\_\_\_\_

**18.  Change Additional Agreements Information**

Are there any agreements, excluding the above, which require payment by the applicant in a dollar figure or percentage of gross or net income of the business?  Yes  No  
If “**YES**,” attach a copy of agreement.

**19.  Change in Shared Premise Information**

Do you share the premises with another business entity?  Yes  No  
If “**YES**,” indicate the tradename(s) of business(es) and sales and use tax number(s) for other business(es):  
Trade Name \_\_\_\_\_  
Sales & Use Tax Number \_\_\_\_\_

**20.  Change Franchise Agreement Information**

Do you or anyone else at the location operate under a franchise agreement?  Yes  No  
If “**YES**,” do you have exclusive control of all phases of the purchase, sale, and service of alcoholic beverages?  Yes  No

## FOOD AND BEVERAGE CERTIFICATE

**21.** Provide **projected** (future) sales data for first 12 months of operation.

Sales Year (YYYY) 20\_\_\_\_\_

Alcoholic Beverage Sales \$ \_\_\_\_\_

Food Sales \$ \_\_\_\_\_

Other Sales \$ \_\_\_\_\_

Total Sales \$ \_\_\_\_\_

### LOCATION ADDRESS FINANCE INFORMATION

Complete this section (22a & 22b) if you have obtained financial assistance from any source since the submission of your last L-L or L-LRC application.

**22.**  **Change in Finance Information**

**a.** What is the new amount of financial assistance for this location? \_\_\_\_\_  
Please be prepared to provide copies of all documents related to the financing of this location.

**b.** List any and all sources of funds advanced to you for your business. If a partnership or corporation, list entity along with partners/officers.

Name, Corporation, Partner/Officer		Date of Birth (mm/dd/yyyy)
SSN or FEIN	Terms	Amount
Name, Corporation, Partner/Officer		Date of Birth (mm/dd/yyyy)
SSN or FEIN	Terms	Amount
Name, Corporation, Partner/Officer		Date of Birth (mm/dd/yyyy)
SSN or FEIN	Terms	Amount
Name, Corporation, Partner/Officer		Date of Birth (mm/dd/yyyy)
SSN or FEIN	Terms	Amount
Name, Corporation, Partner/Officer		Date of Birth (mm/dd/yyyy)
SSN or FEIN	Terms	Amount

**(If more space is needed, attach additional page.)**

**WARNING AND SIGNATURE**

**If Applicant Is/Must Sign**

Individual/Individual Owner	Corporation/Officer
Partnership/Partner	Limited Liability Company/ Officer or Manager
Limited Partnership/General Partner	

**EACH LICENSEE OR PERMITEE SHALL HAVE EXCLUSIVE OCCUPANCY AND CONTROL OF THE ENTIRE LICENSED LOCATION WITH RESPECT TO SALE OF ALCOHOLIC BEVERAGES. ANY ARRANGEMENT THAT SURRENDERS SUCH CONTROL OF THE EMPLOYEES, PREMISES OR BUSINESS, INCLUDING PROFITS AND LOSSES, TO PERSONS OTHER THAN THE LICENSEE OR PERMITEE IS UNLAWFUL.**

**WARNING:** Section 101.69 of the Texas Alcoholic Beverage Code states: "...a person who knowingly makes a false statement or false representation in an application for a permit or license or in a statement, report, or other instrument to be filed with the Commission and required to be sworn commits an offense punishable by imprisonment in the Texas Department of Criminal Justice for not less than 2 nor more than 10 years."

**BY SIGNING YOU ARE SWEARING TO ALL INFORMATION AND ATTACHMENTS TO THIS PACKET.**

PRINT NAME \_\_\_\_\_ SIGN HERE \_\_\_\_\_

TITLE \_\_\_\_\_

Before me, the undersigned authority, on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, the person whose name is signed to the foregoing application personally appeared and, duly sworn by me, states under oath that he or she has read the said application and that all the facts therein set forth are true and correct.

SIGN HERE \_\_\_\_\_  
NOTARY PUBLIC

**S E A L**



Trade Name or Permit Number \_\_\_\_\_

**OWNER OF PROPERTY INFORMATION**

1. Indicate if owner of property is:

- Owner of Land and Building  Owner of Land  Owner of Building  Owner of Boat

**Note: If land and building are owned by different entities, complete Form L-OP for each entity.**

**INDIVIDUAL OWNER**

2. Full Legal Name (Last, First, Middle): \_\_\_\_\_ Date of Birth (mm/dd/yyyy) \_\_\_\_\_

SSN: \_\_\_\_\_

**BUSINESS ENTITY OWNER**

3. Name of Business Entity \_\_\_\_\_

Federal Employer Identification Number (FEIN) for Owner of Property \_\_\_\_\_

Full Legal Name of Partner, Officer (Last, First, Middle) \_\_\_\_\_ Date of Birth (mm/dd/yyyy) \_\_\_\_\_

Title \_\_\_\_\_

Full Legal Name of Partner, Officer (Last, First, Middle) \_\_\_\_\_ Date of Birth (mm/dd/yyyy) \_\_\_\_\_

Title \_\_\_\_\_

Full Legal Name of Partner, Officer (Last, First, Middle) \_\_\_\_\_ Date of Birth (mm/dd/yyyy) \_\_\_\_\_

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Title \_\_\_\_\_

Full Legal Name of Partner, Officer (Last, First, Middle) \_\_\_\_\_ Date of Birth (mm/dd/yyyy) \_\_\_\_\_

Title \_\_\_\_\_

**IF YOU NEED MORE SPACE USE ADDITIONAL COPIES OF THIS PAGE**



**TEXAS ALCOHOLIC  
BEVERAGE COMMISSION**  
*Texans Helping Businesses & Protecting Communities*

**SUBLESSOR**

L-SL  
(8/2020)

1. Trade Name of Location

2. Indicate if you are:

Sublessor  Concessionaire  Management Company of Permittee

3. Business Entity Name for Sublessor, Concessionaire or Management Company

4. Federal Employer Identification Number (FEIN) for Sublessor, Concessionaire or Management Company

**COMPLETE THE FOLLOWING:**

Full Legal Name of Individual, Partner, Officer (Last, First, Middle)	Date of Birth (mm/dd/yyyy)
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Title/Owner	
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Full Legal Name of Individual, Partner, Officer (Last, First, Middle)	Date of Birth (mm/dd/yyyy)
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Title/Owner	
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Full Legal Name of Individual, Partner, Officer (Last, First, Middle)	Date of Birth (mm/dd/yyyy)
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Title/Owner	
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Full Legal Name of Individual, Partner, Officer (Last, First, Middle)	Date of Birth (mm/dd/yyyy)
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Title/Owner	
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Full Legal Name of Individual, Partner, Officer (Last, First, Middle)	Date of Birth (mm/dd/yyyy)
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Title/Owner	
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**IF NECESSARY USE ADDITIONAL COPIES OF THIS PAGE**

STATE OF TEXAS

§

BEFORE THE TEXAS

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§

ALCOHOLIC

§

COUNTY OF TRAVIS

§

BEVERAGE COMMISSION

**AFFIDAVIT OF FOOD & BEVERAGE CERTIFICATE APPLICANT**

Before me, the undersigned notary, on this day personally appeared \_\_\_\_\_  
\_\_\_\_\_ who, being by me duly sworn, said as follows:

1. "My name is \_\_\_\_\_, and I am over 18 years of age, of sound mind, capable of making this affidavit, and personally acquainted with the facts herein stated;
2. I am the permittee for \_\_\_\_\_  
d/b/a \_\_\_\_\_, PERMIT NO. \_\_\_\_\_,  
which is located at \_\_\_\_\_ (Address),  
\_\_\_\_\_ (City), Texas \_\_\_\_\_ (Zip);
3. Projected receipts from the sales of alcoholic beverages are 60% or less of the total gross receipts of the location;
4. Food service is maintained on the licensed/permitted premises;
5. There is a permanent food service facility on the licensed/permitted premises;
6. There are multiple entrees available to customers;
7. Food items are primarily consumed on the licensed location;
8. Hours of operations for the sale and service of food are at least the same hours for the sale and service of alcoholic beverages;
9. Records for food service will be made available for inspection or audit, even if the food service facility at the location is maintained by a separate business entity than the permittee.
10. I affirm to TABC that my location is eligible to receive a Food & Beverage Certificate. I understand the Food & Beverage Certificate may be cancelled at any time if TABC finds that the location does not meet the eligibility requirements. I further understand that if the Food & Beverage Certificate is cancelled for such reason, I will be ineligible to apply for a new certificate until one calendar year has passed from the initial cancellation.

11. I have received a copy of the Minimum Standard Health Protocols Checklist for Restaurants (revised July 2, 2020) and read through its contents. I understand that I must follow the health protocols contained in the Checklist for Restaurants, including any future revisions of the health protocols, and maintain on-premise alcohol sales below 51% of total sales in order to lawfully provide dine-in services as a restaurant;
12. I understand that pursuant to Texas Alcoholic Beverage Code § 101.69 a person who knowingly makes a false statement in a report or other instrument to be filed with the commission and required to be sworn commits an offense punishable by imprisonment in the Texas Department of Criminal Justice for not less than 2 nor more than 10 years; and
13. I swear under the penalty of perjury that the foregoing statements are true and correct.”

\_\_\_\_\_  
Affiant’s Signature

\_\_\_\_\_  
Affiant’s Printed Name

SWORN TO AND SUBSCRIBED before me on the \_\_\_\_\_ day of \_\_\_\_\_, 2020.

\_\_\_\_\_  
Notary Public in and for the State of Texas

\_\_\_\_\_  
Notary’s Printed Name

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**NOTE:** As stated on the Commission’s public website under the “Coronavirus Information” section, you may provide an unsworn declaration in lieu of a notary. Further information may be found at: <https://www.tabc.texas.gov/coronavirus/index.asp#submit>



# MINIMUM STANDARD HEALTH PROTOCOLS



## CHECKLIST FOR RESTAURANTS

Page 1 of 4

***Effective June 29, 2020, restaurants may operate for dine-in service up to 50% of the total listed occupancy inside the restaurant; outdoor dining is not subject to an occupancy limit; and restaurant employees and contractors are not counted towards the occupancy limitation. This applies only to restaurants that have less than 51% of their gross sales from alcoholic beverages. Restaurants may continue to provide to-go or delivery services. All employees and customers must wear a face covering (over the nose and mouth) wherever it is not feasible to maintain six feet of social distancing from another individual not in the same household, except when seated at the restaurant to eat or drink.***

*The following are the minimum recommended health protocols for all restaurants choosing to operate in Texas. Restaurants may adopt additional protocols consistent with their specific needs and circumstances to help protect the health and safety of all employees, contractors, and customers.*

*The virus that causes COVID-19 can be spread to others by infected persons who have few or no symptoms. Even if an infected person is only mildly ill, the people they spread it to may become seriously ill or even die, especially if that person is 65 or older with pre-existing health conditions that place them at higher risk. Because of the hidden nature of this threat, everyone should rigorously follow the practices specified in these protocols, all of which facilitate a safe and measured reopening of Texas. The virus that causes COVID-19 is still circulating in our communities. We should continue to observe practices that protect everyone, including those who are most vulnerable.*

*Please note, public health guidance cannot anticipate every unique situation. Restaurants should stay informed and take actions based on common sense and wise judgment that will protect health and support economic revitalization. Restaurants should also be mindful of federal and state employment and disability laws, workplace safety standards, and accessibility standards to address the needs of both workers and customers.*

### Health protocols for serving your customers:

- Groups maintain at least 6 feet of distance from other groups at all times, including while waiting to be seated in the restaurant. The 6 feet of distance between groups seated at different tables is not required if the restaurant provides engineering controls, such as a partition, between the tables.
  - A booth may be next to another booth as long as a partition is constructed between the booths, and that partition is at least 6 feet tall above ground level.
  - Tables should generally be at least 6 feet apart from any part of another table. However, a restaurant may have tables at least 4 feet apart from any part of another table, provided the restaurant uses a partition between the tables that is at least 6 feet tall and 6 feet wide.
- Make a hand sanitizing station available upon entry to the restaurant.
- No tables of more than 10 people.
- Dining:
  - Do not leave condiments, silverware, flatware, glassware, or other traditional table top items on an unoccupied table
  - Provide condiments only upon request, and in single use (non-reusable) portions.
  - Use disposable menus (new for each patron)
  - If a buffet is offered, restaurant employees serve the food to customers.
- Contactless payment is encouraged. Where not available, contact should be minimized. Both parties should wash or sanitize hands after the payment process.

# MINIMUM STANDARD HEALTH PROTOCOLS



## RESTAURANTS: Page 2 of 4

### Health protocols for your employees and contractors:

- Train all employees and contractors on appropriate cleaning and disinfection, hand hygiene, and respiratory etiquette.
- Screen employees and contractors before coming into the restaurant:
  - Send home any employee or contractor who has any of the following new or worsening signs or symptoms of possible COVID-19:
    - Cough
    - Shortness of breath or difficulty breathing
    - Chills
    - Repeated shaking with chills
    - Muscle pain
    - Headache
    - Sore throat
    - Loss of taste or smell
    - Diarrhea
    - Feeling feverish or a measured temperature greater than or equal to 100.0 degrees Fahrenheit
    - Known close contact with a person who is lab confirmed to have COVID-19
  - Do not allow employees or contractors with new or worsening signs or symptoms listed above to return to work until:
    - In the case of an employee or contractor who was diagnosed with COVID-19, the individual may return to work when all three of the following criteria are met: at least 3 days (72 hours) have passed *since recovery* (resolution of fever without the use of fever-reducing medications); and the individual has *improvement* in symptoms (e.g., cough, shortness of breath); and at least 10 days have passed *since symptoms first appeared*; or
    - In the case of an employee or contractor who has symptoms that could be COVID-19 and does not get evaluated by a medical professional or tested for COVID-19, the individual is assumed to have COVID-19, and the individual may not return to work until the individual has completed the same three-step criteria listed above; or
    - If the employee or contractor has symptoms that could be COVID-19 and wants to return to work before completing the above self-isolation period, the individual must obtain a medical professional's note clearing the individual for return based on an alternative diagnosis.
  - Do not allow an employee or contractor with known close contact to a person who is lab-confirmed to have COVID-19 to return to work until the end of the 14 day self-quarantine period from the last date of exposure (with an exception granted for healthcare workers and critical infrastructure workers).
- Have employees and contractors wash or sanitize their hands upon entering the restaurant, and between interactions with customers.
- Have employees and contractors maintain at least 6 feet of separation from other individuals. If such distancing is not feasible, measures such as hand hygiene, cough etiquette, cleanliness, and sanitation should be rigorously practiced.

# MINIMUM STANDARD HEALTH PROTOCOLS



## RESTAURANTS: Page 3 of 4

### Health protocols for your facilities:

- Take steps to ensure 6 feet social distancing is maintained at the bar between individual patrons, between patrons and wait staff, and between patrons and bar items such as clean glassware and ice. Such separation may be obtained by ensuring bartenders remain at least 6 feet from customers at the bar, such as by taping off or otherwise blocking bartenders from being within 6 feet of a seated customer, or the use of engineering controls, such as dividers, to keep individuals and/or the bar separate from other individuals.
- Consider having an employee or contractor manage and control access to the restaurant, including opening doors to prevent patrons from touching door handles.
- Regularly and frequently clean and disinfect any regularly touched surfaces, such as doorknobs, tables, and chairs.
- Regularly and frequently clean restrooms, and document the cleanings.
- Disinfect any items that come into contact with customers.
- Make hand sanitizer, disinfecting wipes, soap and water, or similar disinfectant readily available to employees, contractors, and customers.
- Consider placing [readily visible signage](#) at the restaurant to remind everyone of best hygiene practices.
- Clean and disinfect the area used for dining (table, etc.) after each group of customers depart, including the disinfecting of tables, chairs, stalls, and countertops.
- Clean and sanitize restaurants daily.
- For restaurants with more than 10 employees and/or contractors present at one time, consider having an individual wholly or partially dedicated to ensuring the health protocols adopted by the restaurant are being successfully implemented and followed.
- TABC staff should monitor restaurants throughout the state of Texas to ensure compliance with these protocols. TABC has the authority to suspend any license that poses an immediate threat or danger to public safety. Failure to follow these protocols may result in a 30-day license suspension for the first infraction, and a 60-day suspension for a second infraction.

### If you have video game equipment or other interactive amusements:

- Assign at least one employee or contractor full time to disinfect the video games and other interactive amusements. **Continuous disinfecting is needed to protect customers.**
- Disinfect all gaming equipment before and after customer use.
- Provide equipment disinfecting products throughout facility for use on equipment.

# MINIMUM STANDARD HEALTH PROTOCOLS



## RESTAURANTS: Page 4 of 4

- Ensure only one player can play a game at a time.
- Provide for at least 6 feet of separation between games.

### Health protocols for valet parking services:

- Take the temperature of each employee or contractor at the beginning of each shift.
- Utilize the following personal protective equipment for employees and contractors:
  - Cloth face coverings over the nose and mouth, or, if available, non-medical grade face masks over the nose and mouth
  - Single-use disposable gloves that are changed between every interaction with customers and/or vehicles
- Vehicle door handles, ignition switch, steering wheel, and shift knob should be wiped with disinfectant as the valet employee enters and exits the vehicle.
- All workstations and work equipment should be cleaned at the start and the end of each shift, as well as every hour during the shift. These workstations should include the valet podium, key storage locker, tablets, fee computers, receipt printers, etc.
- Valet parking operators should employ contactless payment whenever possible.
- For high volume operations, appropriate physical distancing indicators should be established to ensure customers maintain at least six feet of distance as they wait for their vehicle.
- Where possible, alternative parking options should be provided for customers who are uncomfortable with valet parking.
- Wash or disinfect hands upon entering a business and after any interaction with employees, other customers, or items in the business.
- Make hand sanitizer, disinfecting wipes, soap and water, or similar disinfectant readily available to employees, contractors, and customers.
- Have employees and contractors maintain at least 6 feet of separation from other individuals.