

Conditional Use Permit Exemption (CUPEX) Application

Project Address: _____ Long Beach, CA 908 ____

Business Name: _____

Applicant Name: _____ Ph: _____ Fax: _____

Mailing Address: _____

City: _____ State: _____ ZIP: _____ Email: _____

Applicant Signature(s): _____

Contact Person Name, Phone No. (if different): _____

Property Owner: _____ Ph: _____ Fax: _____

Address: _____ City: _____ State: _____ ZIP: _____

(I/We), the undersigned, declare under penalty of perjury under the laws of the State of California that (I am/We are) the owner(s) of the property involved in this application; that the information on all plans, drawings and sketches attached hereto and all the statements and answers contained herein are in all respects true and correct.

Property Owner Signature: _____ Date: _____

Exemption Requested:

Restaurant, alcohol sale with meal services only. No fixed bar permitted. Alcohol sales not to exceed 30% of total gross sales.

More than 500 feet from a Zoning district allowing residential use.

Existing legal nonconforming use.

Grocery store, 20,000 square feet or greater, with accessory sale of alcoholic beverages.

If site is currently licensed, what type of alcohol license does it have? _____

What type of alcohol license are you requesting?

20 21 40 41 42 47 48

Please include with this application:

- One set of floor plans;
- Photographs of the building street frontage, exterior, and interior, mounted on 8½" x 11" sheets of paper; and
- Affidavit form the California ABC Department, signed by the applicant.

BELOW THIS LINE FOR STAFF USE ONLY

Counter Staff Review:	Filing date:	Application No.:
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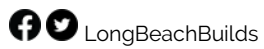


City of Long Beach

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Long Beach, CA 90802

Visit us at longbeach.gov/lbds



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