



Liquor License Verification



2406 Leopard St. Corpus Christi, TX 78408 | Phone: 361.826.3240 | Fax: 361.826.4375

Name of Business: _____
Change of Location to: _____
Business License Applied for: _____
Zoning of Business: _____
Primary Business at This Location: _____

On-Premise License **Off-Premise License**

License Statement of Officer

I, attest that the distance between the places of business that is within the corporate limits of Corpus Christi that dispenses and sells alcoholic beverages for on-premises consumption is not within 300 feet of any church, public hospital, public or private school, child-care facility, or day-care center; in accordance with the Code of Ordinances Sec. 4-5.

Approved **Disapproved** _____

I affirm that the proposed licensee's place of business is located in a zone where alcoholic beverages are permitted to be sold.

Approved **Disapproved** _____

Is a new Certificate of Occupancy required for this location? **Yes** **No**

Already applied for C of O **Needs to apply for C of O** **C of O Exists**

Zoning Approver's Name: _____ **Date:** _____

Approver's Name: _____ **Date:** _____