

## Request to the City Council M& C#\_\_\_\_\_ ALCOHOL DISTANCE APPEAL APPLICATION

(Please Print or Type)

Name of Establishment		Location	
Legal Description		Block/Ab	Lot/Tr
Owner of Establishment		Owner Signature	
Owner Address		City	Zip
Owner Phone No	2 <sup>nd</sup> Ph No	Email	
Name of School or Church < 300	ft / 1000 ft from the establishment	t	
Has the School, Church, etc. b	een contacted or do you know	of any opposition to this requ	est? Yes□ No□
Is Alcohol Consumption: ON PRE	MISE 🗆 or OFF PREMISE 🗆 Typ	e of TABC License(s)	
Type of Business	Setback Measure	rement / Distance Requested	Is building leased? Yes□ No□
Building Owner / Lessor name		Lessor Signature	
Lessor Address		City	Zip
Lessors Phone No 2 <sup>nd</sup> Ph No		Email	
Applicant Name (if other than Ow	vner)		
Applicant Address		City	Zip
Applicant Phone No	2 <sup>nd</sup> Ph No	Email	
ALCOHOL DISTANCE APPEA	L PROCESS & REQUIREMENT	S:	
Building Inspector, Ken M	cGowen (817-392-7834), (Rejection	on Letter and Measurements requ	uired PRIOR TO SUBMITTING).
°	nately 4 weeks and the request wi nd the applicant is required to be		ty Council Hearing. Hearings are held

- □ Summery of hardship and/or reason for requesting a DISTANCE APPEAL is recommended.
- □ Staff to provide Early Notifications to surrounding HOA's, Schools, etc., within a ¼ mile buffer of subject property.
- Staff will notify all property owners, neighbors, within a 300' buffer of subject property (You may contact Council Members prior to the hearing to see if they approve or have received opposition for your case at http://fortworthtexas.gov)

\*\* At the hearing, "Speaker Request forms" must be completed and turned in to the staff desk upon addressing the City Council.

According to the City Council Rules of Procedures, individual citizen presentations shall be limited to three minutes, and group presentations shall be limited to six minutes. At the Mayor's discretion, time limits may be reasonably extended. To speak before the meeting you may call 817-392-6150, fax 817-392-6196 or http://fortworthtexas.gov)\*\*

Application Fee	Received	Date	Hearing Date	Case #
Code 124 <u>\$500.00</u>	Ву:			