



Add<sup>o</sup>n Premises

SMALL TOWN, BIG BEACH™

ALCOHOLIC BEVERAGE BUSINESS LICENSE APPLICATION

Please complete and return with your ABC Board License Application.

NAME OF APPLICANT Road Trip LLC aka Speakeasy Spirits
MAILING ADDRESS 1715 Windpointe Cove, Gulf Breeze, FL 32563
NAME OF BUSINESS Speakeasy Spirits
PHYSICAL ADDRESS 701 Gulf Shores Pkwy, Gulf Shores, AL 36542
OWNER OF PROPERTY IF OTHER THAN APPLICANT Premier Perpetuals
TELEPHONE (BUSINESS) 850-261-8803 (HOME)
NEW LICENSE TRANSFER

DO YOU INTEND TO HAVE AMPFLIFIED OR EXTERIOR MUSIC YES NO

Please list three references with mailing addresses for all corporate officers. Use other side of sheet if necessary.

Note: Nonresident applicants or residents of less than one year must provide references from former place of residence. These references shall be from a banking official, Police Chief, or Chiefs agent, and one other individual of good standing in the business sector.

Table with 3 columns: Name, Address, Telephone. Rows 1, 2, 3.

MANAGER OF BUSINESS Mickie Robison
ADDRESS 1715 Windpointe Cove, Gulf Breeze, FL 32563
TELEPHONE DATE/PLACE OF BIRTH Gulf, AL
HAS MANAGER EVER BEEN ARRESTED OR CONVICTED? No
IF SO, STATE NATURE, DATE, AND FINAL DISPOSITION.



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I/we, the undersigned applicant(s) agree that I/we will be responsible for making the necessary arrangements with the GULF SHORES COMMUNITY DEVELOPMENT DEPARTMENT AND FIRE DEPARTMENT to ensure all necessary requirements and inspections have been met and/or performed **PRIOR** to the date of the City Council's Public Hearing on this license. If the establishment requires further work as a result of the above-referenced inspections, I/we understand a City Business License will **NOT** be issued until such work is complete.

I/we understand that I/we will be responsible for making the necessary arrangements with the Gulf Shores Police Department for fingerprinting.

Furthermore, I/we understand the city will enforce time of 10pm (Monday-Thursday) and 11pm (Friday, Saturday & Sunday) for noise associated with bars or restaurants to be brought to a reasonable level.

  
Applicant

\_\_\_\_\_  
Applicant

Public Hearing Date: \_\_\_\_\_

cc: Community Development Department  
Fire Department  
Police Department