



CITY OF CHANDLER LIQUOR LICENSE APPLICATION

Telephone (480) 782-2299 ♦ TDD 1-800-367-8939

MAILING ADDRESS

Mail Stop 701
PO Box 4008
Chandler, AZ
85244-4008

LOCATION

1st Floor
175 South Arizona Ave
Chandler, AZ

Chandler Business Registration Number: _____ State Liquor License Number: _____

1. Applicant or Agent: _____ Date: _____
 Business/Organization Name: _____ Phone No.: _____
 Address (Chandler Location): _____
 Mailing Address: _____

2. The term of City liquor licenses is July 1 – June 30, annually. Fees for new licenses are pro-rated on a calendar quarter basis for the first year. All liquor licenses renew on July 1 with the annual fee payable in advance.

		** FEE SCHEDULE **			
		Application	Issuance	Annual	
1	In-State Producer	\$200.00	\$200.00	\$1,000.00	APPLICATION \$200.00
3	Domestic Microbrewery	\$200.00	\$200.00	\$1,000.00	
4	Wholesale, All Liquors	\$200.00	-	-	
5	Government	\$200.00 processing fee			ISSUANCE \$ _____
6	On-Sale Retailer, All Liquors	\$200.00	\$200.00	\$1,000.00	
7	On-Sale Retailer, Wine and Beer	\$200.00	\$200.00	\$550.00	ANNUAL \$ _____
8	Conveyance	\$200.00	\$200.00	\$400.00	
9	Off-Sale Retailer, All Liquors	\$200.00	\$200.00	\$500.00	
10	Off-Sale Retailer, Wine and Beer	\$200.00	\$200.00	\$350.00	TOTAL \$ _____
11	Hotel/Motel License	\$200.00	\$200.00	\$1,000.00	
12	Restaurant License	\$200.00	\$200.00	\$1,000.00	101-0000-0000-4210
13	Domestic Farm Winery	\$200.00	\$200.00	\$1,000.00	
14	Private Club License	\$200.00	\$200.00	\$300.00	
18D	In-State Craft Distillery	\$200.00	\$200.00	\$1,000.00	
19	Remote Tasting Room	\$200.00	\$200.00	\$1,000.00	

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4. If the State license is not granted by the Department of Liquor License and Control until after the expiration of the calendar quarter in which the applicant first applied for the license, the applicant may be entitled to a refund of the prorated license costs associated with any unused period by making written request to the License Administrator.

5. Extension of Premises: Permanent \$100.00* \$ _____
101-0000-0000-4210

Authorized Signature: _____ Date: _____