

Zoning:

CERTIFICATE OF CITY, TOWNSHIP OR COUNTY CLERK

License Type (applicant check one):

- | | | |
|--|--|---|
| <input type="checkbox"/> Caterer | <input type="checkbox"/> Hotel | <input type="checkbox"/> Non-Beverage User |
| <input type="checkbox"/> Distributor | <input type="checkbox"/> Hotel/Caterer | <input type="checkbox"/> Packaging/Warehousing Facility Permit |
| <input checked="" type="checkbox"/> Drinking Establishment | <input type="checkbox"/> Manufacturer | <input type="checkbox"/> Private Club: <input type="checkbox"/> A or <input type="checkbox"/> B |
| <input type="checkbox"/> Drinking Establishment/Caterer | <input type="checkbox"/> Microbrewery | <input type="checkbox"/> Producer |
| <input type="checkbox"/> Farm Winery | <input type="checkbox"/> Microbrewery Packaging/Warehouse | <input type="checkbox"/> Public Venue |
| <input type="checkbox"/> Farm Winery Outlet | <input type="checkbox"/> Microdistillery | <input type="checkbox"/> Retailer |
| <input type="checkbox"/> Fulfillment House | <input type="checkbox"/> Microdistillery Packaging/Warehouse | <input type="checkbox"/> Special Order Shipping |

NOTICE TO CITY/COUNTY CLERK: Submission of this zoning form by the applicant to the City or County constitutes notification to the governmental entity that an application for a liquor license has been or will be received by the ABC. Should the City or County you represent desire to make any comments, suggestions or recommendations relative to the granting of or refusal to grant a license to the above-named applicant; or, the premise for which licensure is sought or to request a hearing pursuant to K.S.A. 41-318 or 41-2608, it may do so by submitting such comments, suggestions, recommendations or requests to the ABC within 10 days of the date you affix your seal to this document. You may submit your written request to the address or fax number provided at the top of the form.

I HEREBY CERTIFY THAT THE PREMISES AT 6254 E. 37th St N, Ste 180 Bel Aire, 67220 IS:
Location Street Address City Zip

(Check one box in each section below)

CITY LIMITS: ☒ **Inside** the incorporate city limits ☐ **Outside** the city limits

Sedgwick
County

New Retailer applicants only: K.S.A. 41-303 states no license shall be granted to any applicant unless:

- The board of county commissioners has adopted a resolution approving the issuance of a license to the location.
A certified copy of such resolution must accompany the license application.

ZONING:

- ☒ located within an area that complies with all applicable zoning regulations required by K.S.A. 41-710 or K.S.A. 41-2608. Farm Wineries, Microbreweries and Microdistilleries **must** be zoned agricultural, commercial or business as required by K.S.A. 41-710(b); **AND**, Retailers, Farm Wineries or Microbreweries premises must comply with the building regulations required by K.S.A. 41-710.
- ☐ located outside an incorporated city, in a township or county **that is not zoned**.
- ☐ I acknowledge a public venue, club or drinking establishment liquor license shall be issued to a farm winery or producer licensee regardless of any local zoning regulations or other regulations if the applicant is a registered agritourism operator.

THE CITY/COUNTY ALLOWS: ☐ Basic Hours ☐ Expanded Hours (Sunday sales)



CLERK SIGNATURE Melissa Krehbiel ☒ City Clerk ☐ Township Clerk ☐ County Clerk

PRINTED NAME Melissa Krehbiel DATE 04/11/2023 PHONE 316-744-2451

- ☒ I understand any changes to the approved diagram must be submitted to the ABC an approved prior to making any change and that this diagram is subject to onsite review by an ABC Enforcement Agent.
- ☒ I understand that I must maintain a copy of the approved diagram on the licensed premise and make it available for immediate inspection upon request.

Under penalties of perjury, I declare the information contained in this document a true, accurate and complete disclosure of information.

Johnny Chandra
Licensee Signature

Johnny Chandra
Printed Name

4/11/2023
Date

ABC Office Use Only

☐ DIAGRAM APPROVED AS SUBMITTED
☐ DIAGRAM DENIED

Reason Denied:

Signature of ABC Official

Date