

**THE CITY OF NEW YORK**  
Community Board 16  
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Genese T. Morgan, Chairperson  
Viola D. Greene-Walker, District Manager

Community Board 16: Liquor License Applicant Interview Questionnaire

1. Please check applicable box for type of license you would like to be considered:  
 **New Liquor License**     **Renewal Liquor License**     **Change Liquor License**  
 **Transfer Liquor License**
2. Please check applicable box for type of license you would like to be considered:  
 **Beer**     **Beer & Wine**     **Retail License (Liquor or Wine Store)**  
 **Retail License (On Premise)**
3. Please check applicable box for type of identification provided:  
 **Driver's License**     **Non-Driver's License**     **Passport**
4. Please state your:  
  
Name:  
  
Title:  
  
Business name:  
  
Address:
5. Is the applicant the same person as the business owner?
6. Is this a social club or establishment open to the general public?
7. What are the skills and qualifications of the business owner to operate this type of establishment?
8. What are the operation days and hours of the establishment?

9. What is the intended start date of the operation?
10. Will there be a cover charge to enter this establishment?
11. How many staff members do you expect to hire within this establishment?
12. What are the titles of those intended staff members?
13. What type of staff training is required to work in this establishment?
14. Will you have security guards on the premises? What days and times?
15. What is the square footage of the storefront?
16. What is the certificate of occupancy for the building?
17. Will the establishment be rented for special events? If so, what type of special events?
18. Has all construction been completed on the establishment?
19. Is the building owned or rented by the business owner?
20. What is your plan for sound proofing?
21. Will food be served on the premises?
22. Has your establishment been approved by the NYC Health Department as a food establishment?