Marion County Alcoholic Beverage Board
Checklist & Procedure

The following items **MUST** be brought to the Marion County Local Alcoholic Beverage Board Hearing in order for your application to be considered by the Local Board. **Do not mail** these items to the Indiana Alcohol & Tobacco Commission.

1. Affidavit of Compliance of Posting
2. Affidavit of Compliance or Notice sent to Property Owners
3. Affidavit from the Department of Metropolitan Development
4. Affidavit from Department of Revenue (Blue Form)

**New & Transfer Permits**
**Except Liquor Dealers**

A. Applicants for new and any type of transfer permit, except Liquor Dealer Permits, must comply with the procedure below:

1. **Post sign:** Post the permit advertising sign available from the Indiana Alcohol & Tobacco Commission (ATC) at least **ten (10) days** prior to the meeting and bring affidavit of posting to the meeting. This sign is available by contacting the ATC at (317) 232-2430, and must be posted in the front window in a conspicuous location visible from the street.

2. **Mail notice to neighborhood organizations:** Written notices must be sent to registered neighborhood organizations that represent the area in which the property is located, and to registered churches and schools within 1000’ of the property. These notices must be mailed at least **15 days** prior to the meeting. Bring completed **Affidavit of Compliance of Notice of Property Owners to the Local Board Hearing**

Names and addresses of property owners, contact persons for neighborhood organizations, churches, and schools can be obtained by submitting the form labeled Exhibit A to:

Deniese Degges  
Department of Metropolitan  
Development 1836 City-County Building  
200 East Washington Street  
Indianapolis, IN 46204  
(317) 327-5155  
Deniese.Degges@indy.gov
This written notice must include the following information:

a. The name and address of the applicant, or if the applicant is a corporation, a club, an association, or an organization, the name and address of the applicant’s president, secretary, and principal owners who will be responsible to the public for the sale of alcoholic beverages.

b. A statement that the applicant has filed an application with the Alcohol and Tobacco Commission for the sale of alcoholic beverages.

c. The specific address where alcoholic beverages are to be sold.

d. The type of alcoholic beverage permit applied for.

e. The date, time and location of the public hearing before the local board regarding the application

e. If there is a desire to remonstrate against the application, the recipient of the notice may attend this public hearing

An affidavit of compliance must be filed with the Local Board stating the notices have been sent and listing the names and addresses to which the notices were sent. A sample affidavit is included.

3. **Zoning Affidavit:** A zoning affidavit, attached as Exhibit B, can be completed online or returned to the mail or email address below:

- **Online:** [http://www.indy.gov/eGov/City/DCE/Inspections/Pages/forms.aspx](http://www.indy.gov/eGov/City/DCE/Inspections/Pages/forms.aspx)
- **In person:** Bureau of Property Safety & Maintenance Services
  Department of Business & Neighborhood Services - City of Indianapolis
  1200 Madison Avenue, Suite 100, Indianapolis, IN 46225

Completed affidavits should be submitted to:
- **Email:** BNS.PropertyInspections@indy.gov
- **Mail:** Bureau of Property Safety & Maintenance Services
  Department of Business & Neighborhood Services - City of Indianapolis
  1200 Madison Avenue, Suite 100, Indianapolis, IN 46225

  (317) 327-5024

4. **Marion County Tax Clearance Form:** You can obtain a tax clearance form at [https://www.in.gov/dor/3769.htm](https://www.in.gov/dor/3769.htm) and return by mail, in person, or by fax to:

- **Mail Address**
  Indiana Department of Revenue
  Att’n: Titles and Clearances
  100 North Senate
  Indianapolis, IN 46204

- **Walk-in Address**
  Indiana Department of Revenue
  Room 105
  100 North Senate
  Indianapolis, IN 46204

- **Fax:**
  317-615-2736
  Attn: Blue Tax Clearance

To speak to an analyst: (317) 232-5977
If you do not follow the above procedure, you will be required to meet the requirements of IC 7.1-3-1-5.5(g), which requires notices to be mailed to all property owners within 500 feet of the business property. IC 7.1-3-5.5(f)(2).

**Liquor Dealers**

**New & Transfer Permits**

B. If the application is for a new or transfer permit for a liquor dealer, whether or not located within the Indianapolis special fire district, then the applicant must, in addition to the requirements set forth above, mail written notice to all property owners within 500 feet of the permit premises and provide an affidavit of compliance. IC 7.1-3-1-5.5(f); IC 7.1-3-1-28(d).

5. **Post sign:** Post the permit advertising sign available from the Indiana Alcohol & Tobacco Commission (ATC) at least ten (10) days prior to the meeting and bring affidavit of posting to the meeting. This sign is available by contacting the ATC at (317) 232-2430, and must be posted in the front window in a conspicuous location visible from the street.

6. **Mail notice to neighboring property owners and neighboring organizations:** Written notices must be sent to property owners within 500’ of the business property and registered neighborhood organizations that represent the area in which the property is located, and to registered churches and schools within 1000’ of the property. These notices must be mailed at least 15 days prior to the meeting.

**Bring completed Affidavit of Compliance of Notice of Property Owners to the Local Board Hearing**

Names and addresses of property owners, contact persons for neighborhood organizations, churches, and schools can be obtained by submitting the form labeled Exhibit A to:

Deniese Degges  
Department of Metropolitan Development  
1836 City-County Building  
200 East Washington Street  
Indianapolis, IN 46204  
(317) 327-5155  
Deniese.Degges@indy.gov
This written notice must include the following information:

a. The name and address of the applicant, or if the applicant is a corporation, a club, an association, or an organization, the name and address of the applicant’s president, secretary, and principal owners who will be responsible to the public for the sale of alcoholic beverages.

b. A statement that the applicant has filed an application with the Alcohol and Tobacco Commission for the sale of alcoholic beverages.

c. The specific address where alcoholic beverages are to be sold.

d. The type of alcoholic beverage permit applied for.

e. The date, time and location of the public hearing before the local board regarding the application

e. If there is a desire to remonstrate against the application, the recipient of the notice may attend this public hearing

An affidavit of compliance must be filed with the Local Board stating the notices have been sent and listing the names and addresses to which the notices were sent. A sample affidavit is included.

7. Zoning Affidavit: A zoning affidavit, attached as Exhibit B, can be completed online or returned to the mail or email address below:

**Online:** [http://www.indy.gov/eGov/City/DCE/Inspections/Pages/forms.aspx](http://www.indy.gov/eGov/City/DCE/Inspections/Pages/forms.aspx)

**In person:** Bureau of Property Safety & Maintenance Services
Department of Business & Neighborhood Services - City of Indianapolis
1200 Madison Avenue, Suite 100, Indianapolis, IN 46225

Completed affidavits should be submitted to:

**Email:** BNS.PropertyInspections@indy.gov

**Mail:** Bureau of Property Safety & Maintenance Services
Department of Business & Neighborhood Services - City of Indianapolis
1200 Madison Avenue, Suite 100, Indianapolis, IN 46225

(317) 327-5024

8. Marion County Tax Clearance Form: You can obtain a tax clearance form at [https://www.in.gov/dor/3769.htm](https://www.in.gov/dor/3769.htm) and return it to:

**Mail Address**
Indiana Department of Revenue
100 North Senate
Indiana, IN 46204

**Walk-in Address**
Indiana Department of Revenue
Room 105
100 North Senate
Indianapolis, IN 46204

**By fax**
317-615-2736
Attn: Blue Tax Clearance

To speak to an analyst (317) 232-5977
Sample Affidavit of Compliance

Property owners and Registered Groups

Affidavit of Compliance of Written Notice for Public Hearing

Marion County Local Alcoholic Beverage Board

I ...Name of person.... do hereby certify that notice of public hearing to consider an application for alcoholic beverage permit # ..List permit number to ....List name of applicant.... at ......Address of permit... was sent by Certified, Registered, or First Class Mail to the last known address of the property owners within 500’ of the business property of the address on the application and registered neighborhood organizations, churches and schools that have registered with the City of Indianapolis Department of Metropolitan Development.

Name Address

List names or address or note that names and address are listed on an attachment

And that said notices were mailed by Certified, Registered or First Class Mail on the date of month day of ...Month...., Year, being at least 15 days prior to the scheduled public hearing.

The foregoing statements are provided under penalty of perjury pursuant to IC 7.1-3-1-28 and Indiana Alcohol & Tobacco Commission Rules.

________________________________________
Signature
Sample Affidavit of Compliance

Registered Groups

Affidavit of Compliance of Written Notice for Public Hearing

Marion County Local Alcoholic Beverage Board

I …Name of person…. do hereby certify that notice of public hearing to consider an application for alcoholic beverage permit # …List permit number to ….List name of applicant…. at .....Address of permit… was sent by Certified, Registered, or First Class Mail to registered neighborhood organizations, churches and schools as provided by the Indianapolis Department of Metropolitan Development.

<table>
<thead>
<tr>
<th>Name</th>
<th>Address</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

List names or address or note that names and address are listed on an attachment

And that said notices were mailed by Certified, Registered or First Class Mail on the date of month day of …Month…. Year, being at least 15 days prior to the scheduled public hearing.

The foregoing statements are provided under penalty of perjury, IC7.1-3-1-28 and Indiana Alcohol & Tobacco Commission Rules.

______________________________________________
Signature
Sample notice letter

To Whom It May Concern:

An application for a (choose the appropriate phrase: new; transfer of owner of an; transfer of location alcoholic of an, transfer of stock of an) alcoholic beverage permit has been filed with the Indiana Alcohol & Tobacco Commission to sell alcoholic beverages by:

Name of Applicant
Address of applicant
For corporations, partnerships, LLC’s include the following information:

Names and addresses of President, Secretary, and all names and address of all individuals who have an interest in the permit. IC 7.1-3-20-8.

The address the permit is to be located at is:

Address of the location where alcoholic beverages are to be sold

The type of permit applied for is:

Type Number; Beer Wine Liquor for On/Off Premise Consumption

There will be a public hearing in front of the Marion County Local Alcoholic Beverage Board on: day, date and time of hearing. The hearing will be held at:

Room 260 City-
County Building
200 East Washington Street
Indianapolis, Indiana 46203

If you wish to remonstrate against the issuance of this permit you may attend this hearing.

Sincerely,
Exhibit A

CITY OF INDIANAPOLIS
DEPARTMENT OF METROPOLITAN DEVELOPMENT
PLANNING DIVISION

LIQUOR LICENSE NOTIFICATION
Fax: (317) 327-7883
Phone: (317) 327-5155

FROM: ___________________________ 

PHONE: ___________________________ 

EMAIL: ________________________ 

BUSINESS NAME: ___________________________ 

Please print clearly the search address: (Street Number, Direction, Name and Suffix): Example: 1234 N. Illinois St. 

___________________________________________________________________________

___________________________________________________________________________

___________________________________________________________________________

___________________________________________________________________________

Date information needed: ___________________________ 

Please allow a minimum of two (2) full working days for a response to your request.

Note: If you have any questions, please contact Deniese Degges at (317) 327-5155. Liquor notification labels include schools, churches and neighborhood organizations.
ZONING CODE INFORMATION

AFFIDAVIT OF APPLICATION

Please complete this form and return it to the Department of Business & Neighborhood Services, 1200 Madison Ave., Suite 100, Indianapolis, Indiana 46225 or email BNS.PropertyInspections@indy.gov

I certify that ________________________________________________ intends to operate

(Owner, Partnership or Corporation)

__________________________________________ located at

(Type of establishment, definitions attached)

__________________________________________ Parcel #____________________________

(Address of Establishment)

Name of establishment: ________________________________________________________

ABC File/Permit #: ______________________________

ZONING INFORMATION

I further certify the following information:

SUNDAY SALES OF ALCOHOL: _______YES _______NO

AREAS WHERE PERSONS UNDER 21 YEARS CAN BE SERVED FOOD: _____YES _____NO

MAXIMUM SEATING CAPACITY: ___________

TOTAL SQ FT. OF BUILDING: ___________

# OF EMPLOYEES PER LARGEST SHIFT: ___________

ON-SITE PARKING SPACES: ___________

LEASED SPACES: ___________

Leased spaces must meet zoning requirements applicable to subject property

REQUIRED PARKING SPACES: ___________

DISTANCE OF BUILDING TO NEAREST PROTECTED DISTRICT: ___________

Dwelling, Hospital, Parks, University Quarter, Church District (SU1); School District (SU2)

YEAR BUILDING BUILT __________

FIRST YEAR OF OPERATION SERVING/SELLING ALCOHOL: ___________

Exhibit B
KNOWN ZONING VIOLATIONS: ___________YES ___________NO

It shall be the responsibility of the owner, partnership or corporation to verify compliance with any development standard, use limitation, commitment, condition or covenant applicable to the subject property.

If any information submitted is false or violations are verified by the Department of Business & Neighborhood Services that would prohibit the above referenced establishment, the Affidavit of Zoning shall be automatically void until the subject property is in full compliance with the applicable restrictions or limitations.

ADDITIONAL INFORMATION

TYPE OF LICENSE REQUESTED________________________________________

_____NEW _____TRANSFER OWNERSHIP/STOCK _____TRANSFER LOCATION _____COMBINATION

Hearing Date: ________________________________

Contact Person: ______________________________

Daytime Phone#: ______________________________

Email: ______________________________

I affirm, under the penalty of perjury, that the foregoing statements are true:

Signature: ________________________________

Printed: ________________________________

State of Indiana    ) ss
County of Marion    )

Before me, a Notary Public, personally appeared ____________________ who acknowledged the execution of the foregoing instrument and who having been duly sworn, state that any representations contained therein are true.

Witness my hand and Notary Seal this ______ day of __________________ 20_____

Signature: ________________________________

Printed: ________________________________

County Of Residence: ________________________________

My Commission Expires: ________________________________