

Request for Warehousing of Liquor Away from Licensed Premises CHECKLIST

Application must be submitted at least fifteen (15) business days prior to the request.

SUBMIT YOUR APPLICATION PACKET IN THE FOLLOWING ORDER:	Form Number	KLD Initial
<input type="checkbox"/> Application for Approval of Off-Premises Warehousing	LIQ-LIC-112	
<input type="checkbox"/> Existing Floor Plan drawn to scale;outlined in BLACK		
<input type="checkbox"/> Active lease indicating storage of Liquor Permitted		
<input type="checkbox"/> Kauai Zoning/Planning Department Clearance	LIQ-LIC-109	
<input type="checkbox"/> Warehousing permit statement of understanding	LIQ-LIC-111	

Note: Any application that is inaccurate or incomplete will be returned.
For questions about forms, please email: liquor@kauai.gov

COUNTY OF KAUAI
DEPARTMENT OF LIQUOR CONTROL
4444 RICE STREET, SUITE 120
LIHUE, KAUAI, HAWAII 96766

PHONE: (808) 241-4966 ▪ FAX: (808) 241-6585

APPLICATION FOR OFF PREMISES WAREHOUSING

NAME OF LICENSEE	DATE
STREET ADDRESS OF WAREHOUSE	TAX MAP KEY
LICENSE NUMBER(S) OF ESTABLISHMENT(S) TO BE USING THE WAREHOUSE	
DATE AND SIGNATURE OF LICENSEE	

Attach scale drawing of floor plan of the warehouse and lease agreement (if applicable).

COMMISSION ACTION AND DATE

KAUAI COUNTY

DEPARTMENT OF LIQUOR CONTROL

4444 RICE STREET, SUITE 120, KAUAI, HAWAII 96766
PHONE (808) 241-4699 • EMAIL LIQUOR@KAUAI.GOV
INTERNET ADDRESS: https://www.kauai.gov/Liquor

**STATEMENT OF UNDERSTANDING FOR
OUTSIDE WAREHOUSE PERMIT**

Note: It is prohibited to share the warehouse with other licensees.

The following items must be submitted with the application (form# LIQ-LIC-110):

- Floor plan drawn to architectural scale** showing liquor storage area outlined in “red”.
- Copy of the lease** and/or document of authorization with Terms and Conditions from the landlord approving the use of the warehouse.
- Approved **Request for Zoning Clearance** (form# LIQ-LIC-109).

STATEMENT OF UNDERSTANDING

Pursuant to the Rules of the Liquor Commission, §3.9, Warehousing, I understand and agree to the following:

- a) Warehousing of liquor off the licensed premises. (a) Any licensee with warehousing off his licensed premises shall keep within the warehouse invoices for all liquor received at the warehouse, and a record of all liquor distributed from the warehouse. All records shall be kept for no less than three years.
- b) Any liquor distributed from the warehouse must be delivered directly to the licensed premises of the licensee.
- c) If a warehouse building is used by more than one licensee, each licensee's space shall be separated with permanent partitions.

SIGNATURE Applicant / Licensee

DATE

PRINT Applicant / Licensee

TITLE

License No.: _____



DEPARTMENT OF LIQUOR CONTROL
THE COUNTY OF KAUAI

DEREK S. K. KAWAKAMI, MAYOR
REIKO MATSUYAMA, MANAGING DIRECTOR

LEO SANDOVAL-REYES
DIRECTOR

REQUEST FOR ZONING CLEARANCE - WAREHOUSING

The Liquor Commission requires a zoning clearance for the site of the warehousing of liquor away from the licensed premises from the liquor license applicant. The applicant must submit this Request for Zoning Clearance to the Planning Department. Once a clearance has been received from the Planning Department, it must be submitted to the Liquor Commission along with this original document.

To: County of Kauai, Planning Department, 4444 Rice Street, Suite A473, Lihue, HI 96766, (808) 241-4055.

Applicant to complete information in this block only. Do not cross out or erase information. If corrections are necessary, please complete a new form. 1. Name of Licensee: Trade Name (DBA): 2. Licensee Mailing Address: 3. Phone No.: Contact Person: 4. Site (business) Address: 5. Tax Map Key (TMK) of site: 6. This is a: [] New Structure [] Existing Structure 6. For warehousing of liquor away from licensed premise, attach a copy of the floor plans, including a location map and description to the Planning Department of where business is proposing to warehouse liquor within the proposed property. 7. Description and type of building or business at intended at site to warehouse liquor: 8. Other business on TMK parcel: [] Yes [] No If "Yes", specify type (i.e., Hotel, Shopping Center, etc.) 9. Class/Category of Liquor License: SIGNATURE of Licensee (owner) or Auth. Agent PRINT of Licensee (owner) or Auth. Agent Date

FOR PLANNING DEPARTMENT USE ONLY:

Zoning District:

Cleared for Liquor Commission Review:

- [] Use is PERMITTED & ZONING PERMITTED FOR THE PROPOSED WAREHOUSING OF LIQUOR
[] NO violation(s) or complaints(s) exist on property

Applicant must contact the Planning Department:

- [] Use is NOT PERMITTED
[] Use is NOT PERMITTED, Unless Additional Permit Obtained (SMA, Use Permit, Special Permit, Variance Permit, Shoreline Setback)

Please indicate which permit is required if any:

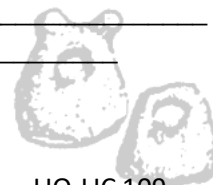
SIGNATURE Planning Department

DATE

www.kauai.gov

4444 Rice Street Suite 120 • Lihue, Hawaii 96766 • (808) 241-4966 (b) • (808) 241-6585 (f)

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LIQ-LIC 109