



# Town of Apple Valley Letter of Public Convenience



Department of Alcoholic Beverage Control  
3737 Main Street, Suite 900  
Riverside, CA. 92501  
(951) 782-4400

## **LETTER OF PUBLIC CONVENIENCE AND NECESSITY** **Initial Deposit: \$243.00**

Date Request Received: \_\_\_\_\_

### **APPLICANT INFORMATION:**

Applicant's Name: \_\_\_\_\_  
Applicant's Address: \_\_\_\_\_  
Premises Address: \_\_\_\_\_  
License Type: \_\_\_\_\_  
Type of Business: \_\_\_\_\_

### **LAW ENFORCEMENT:**

High Crime Rate Location: Yes \_\_\_\_\_ No \_\_\_\_\_  
Distance to Nearest Church or Hospital: \_\_\_\_\_  
Distance to Nearest School, Park, or Youth Facility: \_\_\_\_\_  
Complaints Against Applicant: Yes \_\_\_\_\_ No \_\_\_\_\_  
Police Problems If License Issued: Yes \_\_\_\_\_ No \_\_\_\_\_  
Additional Remarks/Explanation: \_\_\_\_\_

Officers Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### **PLANNING:**

Permitted Use: Yes \_\_\_\_\_ No \_\_\_\_\_  
\_\_\_\_\_

Conflicts With Public Necessity and Convenience: Yes \_\_\_\_\_ No \_\_\_\_\_

Planner's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**APPROVED:** \_\_\_\_\_ **DENIED:** \_\_\_\_\_

Reasons for Approval or Denial:

BY: \_\_\_\_\_ DATE: \_\_\_\_\_

TITLE: \_\_\_\_\_

**Note: This decision may be appealed to the Town Council**