

SECTION 6 – APPLICANT ENTITY FELONY CONVICTION

Business Name (D/B/A)

The Example Bar

Has the applicant entity been convicted of a felony in this state, any other state, or by the United States in the last 15 years?

☐ Yes ☐ No

If the answer is "Yes," please list all details including the date of conviction, the crime for which the entity was convicted, and the city, county, state and court where the conviction took place.

(Attach additional sheets if necessary)

**SECTION 7 – SPECIAL LICENSE REQUIREMENTS
(DOES NOT APPLY TO BEER AND WINE LICENSES)**

Please check the appropriate box of the license for which you are applying. Fill in the corresponding requirements for the license type sought.

☐ Quota Alcoholic Beverage License ☐ Specialty Alcoholic Beverage License (e.g. SRX, S, etc)
☐ Club Alcoholic Beverage License

This license is issued pursuant to _____, Florida Statutes or Special Act, and as such we acknowledge the following requirements must be met and maintained:

Please initial and date:

Applicant's Initials _____ Date _____