

PUBLIC CONVENIENCE or NECESSITY INFORMATION FORM

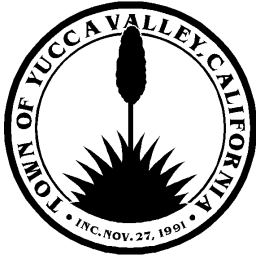
According to the Department of Alcoholic Beverage Control (ABC), you have applied for a license to sell alcoholic beverages at a premise that is located in an area where there is an over-concentration of alcoholic beverage licenses and/or higher than average crime rate. Therefore, ABC may deny your application unless the Town of Yucca Valley makes a determination that public convenience or necessity will be served by your proposed project.

To assist the Town of Yucca Valley in making this determination, the applicant must complete the attached application form as well as provide a **typed detailed letter** stating how public convenience or necessity would be served by issuance of the applied license. This letter should include, but not limited to, the following:

1. Describe how the issuance of the license and/or operation of the business **will not** contribute to or aggravate an existing crime problem in the area.
2. Describe how your business will provide products and/or services that are different and unique to the area that existing businesses selling alcohol within the immediate area do not provide.
3. Attach any documentation regarding over-concentration you received from ABC.

Filing Fee: See Attached Fee Schedule. The filing fee is required at the time the request is submitted to the Town. Should the request be denied, no refund will be given.

Once an application is submitted and deemed complete, Planning staff will forward the request to the Sheriff=s Department for crime statistics and the finding that the proposal will not contribute or aggravate an existing crime problem in the area. This process generally takes 2 to 4 weeks. Upon the determination of public convenience or necessity, a letter will be sent to ABC with a copy to the applicant.



Date Received	_____
By	_____
Fee	_____
Case #	_____

PUBLIC CONVENIENCE or NECESSITY

(Print Legibly)

Applicant _____ Phone _____

Address: _____

City _____ State _____ Zip _____

Name of Business _____ Phone _____

Business Address _____

City _____ State _____ Zip _____

Property Owner _____ Phone _____

Address: _____ City _____ State _____ Zip _____

Assessor=s Parcel Number (s) _____

Square-Footage of Business _____

Percent (%) of Overall Sales Related to Alcohol _____

Existing Land Use _____

Attach a typed detail letter and any documentation regarding over-concentration you have received from ABC.

Applicant's Signature _____ Date _____

**Town of Yucca Valley
Community Development/Public Works Department
58928 Business Center Dr
Yucca Valley, CA 92284
760 369-6575 Fax 760 228-0084**