



County of San Diego, Planning & Development Services  
**DISCRETIONARY PERMIT APPLICATION**  
FOR DETERMINATIONS OF PUBLIC CONVENIENCE OR NECESSITY FOR  
ALCOHOLIC BEVERAGE LICENSE APPLICATIONS  
**ZONING DIVISION**

**RECORD ID(S):** \_\_\_\_\_

	Planning	LD Review Teams	DEH	Trails Review	Other
<b>Fees</b>	_____ +	_____ +	_____ +	_____ +	_____
<b>Deposits</b>	_____ +	_____ +	_____ +	_____ +	_____

**TOTAL FEES AND INITIAL DEPOSIT: \$** \_\_\_\_\_

**OWNER'S NAME** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**APPLICANT'S NAME:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Mailing Address:** \_\_\_\_\_

**Project Contact Phone Number & Email:** \_\_\_\_\_

**PREMISE ADDRESS:** \_\_\_\_\_

**PREMISE PHONE:** \_\_\_\_\_

1. Premise Assessor's Parcel Number: \_\_\_\_\_

2. Premise Census Tract: \_\_\_\_\_

3. ABC License Type: \_\_\_\_\_

4. Type of Business (bar, mini-mart, gas station, etc.): \_\_\_\_\_

5. Describe uses/activities that will be included as part of the business: \_\_\_\_\_

6. New or existing business? \_\_\_\_\_ *If in an existing building, provide an exterior photo.*

7. Previous ABC licenses at this address? \_\_\_\_\_

5510 OVERLAND AVE, SUITE 110, SAN DIEGO, CA 92123

For any questions, please email us at: [PDSZoningPermitCounter@sdcounty.ca.gov](mailto:PDSZoningPermitCounter@sdcounty.ca.gov)

*\* http://www.sdcounty.ca.gov/pds*  
**PDS-PLN-655\***

8. Have you had previous licenses at other sites? \_\_\_\_\_  
Where? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
9. Number of other retail outlets (stores, bars, restaurants, etc.) selling alcohol within a 1,000 foot radius of proposed site? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
10. Location of nearest dwelling units within 1,000 feet:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
11. Location and names of schools within 1,000 feet:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_
12. Location and names of playgrounds, youth facilities or day care facilities within 1,000 feet:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**APPLICANT'S STATEMENT**

Attach a statement or explain below why Public Convenience or Necessity would be served by the issuance of this proposed alcoholic beverage license.

Signature of Owner / Authorized Agent  
(Attach a Letter of Authorization for any Agent)

Date

----- OFFICIAL USE ONLY -----

Thomas Guide Page/ Grid No.:Community Plan Area:

Planning/ Sponsor Group:Supervisor District:

Use Regulations at the site:

Is the proposed use permitted by the Use Regulations applying to the site?

Unresolved Health or Building Code violations of record at the site?

Technician's Comments:

Reviewed by:Date: