



**Business Name:** \_\_\_\_\_ **Date Submitted:** \_\_\_\_\_

**Hours of Operation:**

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**Boundary:** (Type of boundary/barrier around the modified premises that marks the area, must be more than markings on ground.)

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**Ingress & Egress:** (How will Licensee control people coming in and out of temporary service area? Will there be an employee stationed there to verify social distancing is occurring and making sure alcohol is not taken of the premises?)

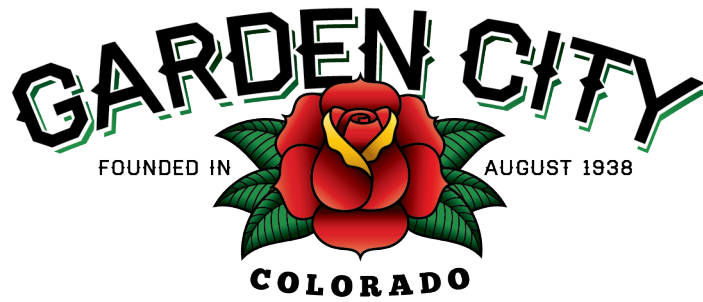
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**Town of Garden City**



**Signage:** (Details the “No alcoholic beverages beyond this point” signage and it’s location on the temporary premises and ideally includes the ingress/egress points.)

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**Responsible Service:** (Details the roll that staff of the establishment will play in preventing sale of alcohol to minors or visibly intoxicated persons. This section can also list staff qualifications such as training and experience.)

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