



# SPECIAL EXTENDED HOURS PERMIT

## ALCOHOL SALES – (FOR CONSUMPTION ON PREMISE)

**RETURN COMPLETED APPLICATION WITH \$500 FEE TO:**

Community Development  
City of Tamarac  
7525 NS 88 Avenue  
Tamarac, FL 33321

**Instructions: Please complete Sections A - D**

### SECTION A

Please check ☒ one of the following

New Application ☒

Renewal Application ☐

### SECTION B

CORPORATE NAME

PHONE

LA TABERNA NIGHT CLUB INC

NAME OF BUSINESS/ORGANIZATION (The name which the business operates under/fictitious name/DBA)

ADDRESS

5303 N STATE ROAD 7, TAMARAC FL 33319

BUSINESS ENTITY ☒ : If the type of business is a **partnership** or **corporation**, please complete SECTION C (page 2).

Sole Proprietorship ☐

Partnership ☐

Corporation ☒

Limited Liability Corporation (LLC) ☐

TYPE OF LIQUOR LICENSE

SEE ATTACH

STATE BEVERAGE LICENSE NUMBER

BEV162763

APPLICANT'S NAME (owner or lessee of the establishment)

APPLICANT'S DATE OF BIRTH

DIANA CRUZ

10.03.80

APPLICANT'S HOME ADDRESS

1001 NW 15TH ST APTS POMPAHO BEACH FL 33064

DATE

APPLICANT'S SIGNATURE

02.17.20

docebutiefly0310@hotmail.com  
marimadrid76@gmail.com

**SECTION C -- If the type of business is a partnership or corporation**

**NOTE: If the establishment is a partnership or corporation, list all proprietors, partners or officers. If establishment is owned by a Corporation, list the names of the officers and all individuals who own 5% or more of the assets of the Corporation owning the establishment. If a Corporation is publicly held, only the officers and directors need to be listed, as well as the Florida Registered Agent.**

If additional space is needed to list, please attach a separate sheet listing the names, addresses, titles, phone numbers and dates of birth and place a check mark on this line. Also attach a copy the corporate listing from the Division of Corporations website, <http://www.sunbiz.org>.

If any of the listed individuals have been convicted of a felony crime within the last five (5) years, please list the name of the individual, the state where the felony took place and the law enforcement agency involved.

NAME <b>Marina S Madrid</b>	TITLE <b>VP</b>
HOME ADDRESS <b>5294 NW 37 AV Fort Lauderdale FL 33309</b>	
DATE OF BIRTH <b>06-24-1983</b>	PHONE <b>772-985-2445 *</b>
NAME	TITLE
HOME ADDRESS	
DATE OF BIRTH	PHONE

**SECTION D**

**Please provide detailed justification for each criterion in a separate written statement**

**(O-2019-24) City of Tamarac Code of Ordinance Chapter 3 "Alcoholic Beverages" Sec.3-4:**

- (c) Such request shall be submitted to the Community Development Department in writing at least three (3) weeks prior to the date of the city commission meeting at which it will be considered.
- (d) The city commission may approve a special permit for a period of one (1) year if it finds that there will be no substantially adverse impact on the surrounding area based on the following criteria:
- 1) Increased parking demands;
  - 2) Increased law enforcement demands;
  - 3) Increased environmental and aesthetic impact, including generation of noise, light and odors;
  - 4) Increased adverse effects on existing properties within the immediate neighborhood;
  - 5) The ability of the establishment's owners or management to minimize the above- listed effects.

**OFFICE USE ONLY:****Department Review**Recommend Approval ☐Recommend Rejection ☐

Director's Signature

Date

**City Commission**Approved ☐Not Approved ☐

Date

Date Issued:

Date Expired: