

Brenda Younger, City Clerk M.M.C. City Hall, 215 SE 7th St., Room 166 Topeka, KS 66603 byounger@topeka.org Tel: 785-368-3940 www.topeka.org

Non-Contiguous Service Area (NCSA) in a CCA Request Form

Request Form

Submit this request form and all required documentation to: City of Topeka City Clerk's Office; 215 SE 7th Street, Room 166; Topeka, Kansas 66603 or email cclerk@topeka.org. For assistance call 785-368-3941 during business hours. Anyone submitting this request form must first have been approved by the State of Kansas ABC to participate in an established CCA, a copy of which has been provided to the City Clerk.

has been provided to the City Clerk. Licensee Information	
Business/Organization:	
On-Premise Business	
•	Area Information Area Information Area Information of showing location of area requesting to be designated as a a. of proof of the property owner's consent for licensee to use
Licensee Information Name of Business/Organization: On-Premise Business Address: Name of Authorized Representative: Email: Phone: Non-Contiguous Service Area Information Location of area to be designated as NCSA: Dates and Hours NCSA will be used: Other Required Documentation (1) Attach a map or drawing showing location of area requesting to be designated as a non-contiguous service area. (2) Attach documentation of proof of the property owner's consent for licensee to use location for a non-contiguous service area. Signature of Requestor: Date Request Submitted:	
Non-Contiguous Service Area In	ormation
I agation of area to be	
designated as IVCO/1.	
Dates and Hours	
NCSA will be used:	
Other Required Documentation	
	ng location of area requesting to be designated as a
non-contiguous service area.	
, , , <u>=</u>	<u> </u>
location for a non-contiguous serv	ce area.
Signature of Requestor:	
Date Request Submitted:	
OFFICE USE ONLY	
Date Received:	Received by:
Date Reviewed:	Reviewed by:
Date Approved:	Approved by: