

DIVISION OF ALCOHOLIC BEVERAGE CONTROL
COPS IN SHOPS SUMMER SHORE INITIATIVE – FFY 2024
GRANT # AL-24-07-02-02

Name of Establishment: _____

Address of Establishment: _____

License Number: _____

I wish to voluntarily cooperate with the _____
(Municipality)

Police Department in implementing the Cops in Shops Summer Shore Initiative at
the above-noted establishment.

Licensee Printed Name

Licensee Signature

Date