

Responsible Vendor Qualifications Checklist

This checklist will be utilized by the Division of Alcoholic Beverages and Tobacco (ABT) to determine the degree to which a licensed vendor has met the qualifications set-out in **Section 561.705, Florida Statutes, Responsible vendor qualifications**, prior to the last violation date cited in the Notice to Show Cause. The vendor and the ABT inspector must answer all questions Yes or No on the checklist.

Question on Qualifications

Section 561.703 Florida Statute – Definitions relating to Florida Responsible Vendor Act

“Vendors” means a person who is licensed pursuant to this chapter, chapter 563, chapter 564, or chapter 565, to sell or serve alcoholic beverages. However, vendors at grocery or drug stores licensed under the provisions of s. 563.02(1)(a) or s. 564.02(1)(a), whose premises are in excess of 5,000 square feet of floor space, shall be exempt from the provisions of this act.

| | Vendor | Inspector |
|---|--|--|
| As a “Vendor” does your business qualify under the provisions of s. 561.703 listed above? | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |

Questions on Training

| | Vendor | Inspector |
|--|--|--|
| 1. The vendor provides an alcoholic beverage course covering: | | |
| a. Alcoholic beverage service and establishment operation laws. | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| b. Effects of alcoholic beverages on the body, individual behavior and motor vehicle operations. | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| c. Methods for recognizing and dealing with underage customers. | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| d. Effects of alcohol in combination with the use of controlled substances. | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| e. Effects of controlled substances on the body, behavior and motor vehicle operations. | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| f. Methods for dealing with customers and employees who use or traffic in controlled substances. | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 2. Each non-managerial employee who is employed to serve alcoholic beverages or checks ID's has completed a server training course within 30 days of employment. | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 3. Each non-managerial employee who is employed to serve alcoholic beverages is supervised prior to taking the course. | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 4. The vendor provides an alcohol server management course which covers: | | |
| a. Alcoholic beverage service and establishment operation laws. | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| b. Effects of alcoholic beverages on the body, individual behavior and motor vehicles operation. | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| c. Methods for recognizing and dealing with underage customers. | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| d. Methods for maintaining records regarding incidents involving underage customers and beverage law. | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| e. Development of standard operating procedures for dealing with customers and employees who use or traffic in controlled substances. | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 5. All managers have completed an alcohol server management course within 15 days of employment. | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 6. All employees have attended tri-annual meetings on responsible vending subjects, policies and procedures. | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |

Questions on Records

| | Vendor | Inspector |
|---|--|--|
| 1. Each employee has completed a questionnaire assessing whether the employee is precluded by law from serving or selling alcoholic beverages. | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 2. The vendor has a written policy which states that an employee who engages in the illegal use of controlled substances on the licensed premises shall be immediately dismissed. | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 3. Each employee has acknowledged, in writing, they vendors policy regarding on premises use of controlled substances. | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| 4. The vendor has: | | |
| a. Employee applications with the date of hire. | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| b. Employee acknowledgements on training, policies and procedures. | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| c. Records of employees dismissals for on premises use of controlled substances. | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| d. Training records. | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| e. Tri-annual meeting records. | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |

Question on Signs Posted Before Violations

| | Vendor | Inspector |
|---|--|--|
| 1. The vendor posts signs information customers that: | | |
| a. Underage customers will not be served alcoholic beverages. | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| b. Purchase of alcoholic beverages by underage persons will result in ejection from the premises and prosecution. | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| c. Illegal use of trafficking in controlled substances will result in ejection from the premises and prosecution. | <input type="checkbox"/> Yes <input type="checkbox"/> No | <input type="checkbox"/> Yes <input type="checkbox"/> No |

Vendor's Acknowledgement and Agreement Section

I acknowledge that I have maintained all of the requirements and qualifications outlined in section 561.705, Florida Statutes, prior to a Notice To Show Cause being issued to the ownership of the business and/or agree to comply with, and maintain the requirements and qualifications outlined in section 561.705, Florida Statutes, from this day forth.

Signature of Licensee or Licensee's Representative: _____

Title: _____ Date: _____

Inspector's Verification Section

This is to confirm that I have inspected and reviewed all of the questions, policies, records, and signs required by this Responsible Vendor Checklist. The inspection has disclosed that the Vendor () is in compliance or () is not in compliance with section 561.705, Florida Statutes.

Signature of Inspector: _____

Title: _____ Date: _____

Comments/Notes: _____

