

Liquor Establishment Observation Report

Date: _____ Time in: _____ Time out: _____

Case Number: _____

Officer(s): _____

Establishment Name: _____ Address: _____

Observations

1. # wait staff/bartenders currently working: _____ # security staff currently working: _____
2. # of patrons: _____ Posted occupancy limit: _____ Not posted/not visible: _____
3. After hours service noted: Yes ____ or No ____ . If yes, time: _____
4. Exits/Lighting/Visibility: Good Fair Poor Parking lot/Outside lighting: Good Fair Poor
5. Did agents observe employees drinking while on duty? Yes ____ or No ____
6. Did agents observe patrons' IDs being checked on people who appeared under 30? (Circle one of the following options.)
All of the time Most of the time Some of the time Never No one under 30 ordering drink
7. Did agents check patrons' IDs? Yes ____ or No ____ . If yes, how many? _____ Results: _____

8. Any patrons appear intoxicated? Yes ____ or No ____ . If yes, how many? _____
9. Over service of alcohol observed? Yes ____ or No ____ .
10. Alcohol leaving the licensed premise? Yes ____ or No ____ .
11. Happy hour/Drink specials/other events at time of visit? Yes ____ or No ____ .
12. Spoke with Manager/Owner? Yes ____ or No ____ . If yes, name: _____

Notes

Names/Subjects

Status: **A** – Arrested **C** - Cited **D** – Detox/Hospital **E** – Employee/Server **M** – Manager/Owner **O** – Other **S** – Suspect **W** – Witness

Name: _____ DOB: _____ Status: _____

Address: _____ City: _____ State: _____ ZIP: _____

Phone: (H) _____ (C) _____ (W) _____

Check all descriptors that apply:

- Odor of Alcohol
- Reddened/Bloodshot Eyes
- Watery/Glassy Eyes
- Slurred Speech
- Slow Speech
- Mumbling/Incoherent
- Staggering
- Using objects/people for balance
- Lying Down
- Asleep
- Unconscious
- Belligerent
- Agitated/Profanity
- Combative/Fighting
- Crying
- Vomiting

Additional Information
Did agents observe person order drink? _____
Did agents observe person drinking? _____

PBT Value: _____

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