П	New Application	
	Renewal	
	Temporary	

Filing Date: _	
Staff Initial:	

## **City of Weldon Spring Liquor License Application**

\*\*Upon completion of the application and background check (if required), this application must be presented to the Weldon Spring Board of Aldermen meeting for approval. \*\*

## **Type of License Requested:**

Туре	Fee	Check if apply	Туре	Fee	Check if apply
<ul> <li>Intoxicating Liquor by the Drink</li> <li>Intoxicating Liquor the Original Package</li> <li>Sunday License</li> <li>5% Beer &amp; Light V by the Drink</li> <li>5% Beer by the Dr</li> <li>5% Beer in the Original Package</li> </ul>	\$450.00 r in ge \$150.00 \$300.00 Vine \$75.00 ink \$75.00 ginal	[]	<ul> <li>Distributor or Wholesa beverages of all kinds</li> <li>Temporary Picnic Lice</li> <li>Special Temporary Lic</li> <li>Club License for Sale of liquor in Excess of 5% weight of alcohol</li> <li>***For All other Types City Clerk</li> </ul> Veldon Spring City Code	\$750.00 nse \$37.50 ense \$75.00 of Intoxicating by \$150.00	
A. Business In					
Name of Business					
Legal Name of Compar	ny:				
Check One: O Individu	al O Partnership O (	Corporation			
Business Address:					
Business Phone: Descrip			escription of Business:		
MO DOR Sales Tax Reg	istration Number: _				
Federal Employer Iden	tification Number: _				
Hours of Operation:		am/pm to			
		am/pm to			
	Sun:	am/pm to	am/pm		
Detailed description of	where and what liq	uor is served:			

<b>B. Applicant Information</b>				
Name of Applicant:				
Applicant Current Residence:				
Applicant Phone Number:	Applica	nt Email: _		
Driver's License Information:				
Applicant Driver License Number:	State:		Date of Birth:	
Place of Birth:				
Has the applicant ever had a liquor license previously?  If yes, indicate "where"	O Yes	O No		
Has the applicant ever had a liquor license revoked?  If yes, indicate "date and place"	O Yes	_		
Has the applicant ever been convicted of a violation of any I O Yes O No  If yes, give dates, charges, and location				
Has the applicant ever been convicted of a felony offense?  If yes, give dates, charges, and location		_		
for a liquor license.  Signature of applicant:				
***All applicants must fill out the Missouri State H	ighway Patrol Requ	est for Cri	minal Record Chec	k on Page 3***
I,, the applicant of this lice be subject to all of the ordinances of the City of Weldon Spr will abide by all lawful ordinances, regulations and rules add business, that he/she is in all respect qualified in law to rece above application are true.	ring pertaining to the opted by the City of	ne operation f Weldon S	on of said business opring relating to th	and agrees that he/she ne conduct of said
Signature of applicant:				
(Applicati	ion Must Be Notar			
Applicant, being duly sworn, to before me this set out in the above application are true.	day of		, 20	States that the facts
Notary Public		My	Commission Expi	res