



POWER COUNTY BEER, WINE, AND LIQUOR APPLICATION

YEAR OF LICENSE: **2026**

☐ NEW

☐ RENEWAL

☐ TRANSFER
(Transfer Fee \$20.00 Flat Fee)

TO THE BOARD OF COUNTY COMMISSIONERS POWER COUNTY, STATE OF IDAHO:

Effective July 2026

The undersigned, hereby, makes application to retail:

LICENSE TYPE:

1. **Draft, Bottled and Canned Beer Consumed *ON* Premise**
2. **Bottled and Canned Beer Consumed *ON* Premise**
3. **Bottled and Canned Beer Consumed *OFF* Premise**
4. **Wine Retail Only (Bottle can be taken off premise)**
5. **Wine By the Drink (Even if sold in bottle but poured in glass at table)**
6. **Wine Special (Sunday)**
7. **Liquor By the Drink (Includes Wine fees)** State Liquor Only Fee
8. **Transfer Flat fee of \$20.00**

COUNTY FEE:

\$ 100.00
\$ 75.00
\$ 25.00
\$ 100.00
\$ 100.00
\$ 100.00
\$ 750.00 X 25%=
\$ 20.00

AMOUNT DUE:

\$ _____
\$ _____
\$ _____
\$ _____
\$ _____
\$ _____
\$ _____
\$ _____

TOTAL OF ALL FEES \$ _____

Name of Applicant(s): _____ (Individual, LLC, Corporation Name)
Doing Business as: _____
Premise Address: _____
Mailing Address: _____
Phone Number: _____ Email Address: _____

Is applicant Citizen(s) of the United States? ☐ Yes ☐ No Over the age of nineteen (19)? ☐ Yes ☐ No Ever been convicted of a felony? ☐ Yes ☐ No	Please make check or money order payable to: Power County, 543 Bannock Avenue, American Falls, ID 83211 Clerk's Office (208)-226-7611
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A CURRENT COPY OF YOUR STATE OF IDAHO RETAIL ALCOHOL BEVERAGE LICENSE MUST BE ATTACHED.

I HEREBY CERTIFY THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND MAKE APPLICATION TO OBTAIN A NEW ALCOHOL BEVERAGE LICENSE WITH POWER COUNTY AND TENDER HERewith THE LICENSE FEE, AS PRESCRIBED BY IDAHO CODE §23. (Sign in the presence of a Notary or a Deputy Auditor at the Power County Courthouse)

Applicant's Signature: _____

COMPLETE FOR TRANSFER ONLY

I hereby authorize the transfer of Beer license No. _____; Wine License No. _____; Liquor License No. _____ to _____ dba _____.

Dated this _____ Signature of Previous Owner _____

Subscribed and sworn to before me this _____ day of _____, 20 _____.

Sharee Sprague
County Clerk

Deputy Auditor or Notary Public Signature

Commission Expires: _____

Residing At: _____

For County Use Only:

	STATE	COUNTY	COUNTY FEE
BEER LICENSE	# _____	# _____	\$ _____
WINE LICENSE	# _____	# _____	\$ _____
LIQUOR	# _____	# _____	\$ _____
		TOTAL	\$ _____
		RECEIPT #	_____