Liquor License Application

Date: _____ New Application Renewal

BUSINESS INFORMATION	
Business Name	
Business Name- as you want it to appear on license	
Business Address	
Mailing Address	
Business Phone Number	
Missouri Sales Tax No.	
FEIN No.	

APPLICANT INFORMATION	
Name	
Date of Birth	
Social Security No.	
Phone No.	
Physical Address	
Is the owner the managing officer?	Yes No If NO the managing officer will need to complete page 3.

Are you a native born or naturalized citizen of the United States? Yes No
If not naturalized, give immigration document number: _____

Have you ever been convicted of any violation of any ordinance of the City of Marshfield, Missouri, or of any other municipality? Yes No
If yes, what charge and date of charge: _____
Location of charge: _____

Have you ever been convicted of any criminal offense against the laws of any State or the Federal government. Yes No
If yes, what charge and date of charge: _____
Location of charge: _____

Have you ever been licensed to sell intoxicating liquor? Yes No
If yes, state when, where, and whether you have ever had a revocation of a license:

_____

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_____	$75.00	5OP	Package Liquor- Beer only (retail)
_____	$150.00	OPL	Package Liquor- Spirits, wine, and Beer (retail)
_____	$300.00	*SOP	Package Liquor- Sunday Sales (retail)
_____	$450.00	RBDR	Spirits, Wine & Beer By the Drink- (resort/restaurant)
_____	$300.00	*SBD	Spirits, Wine & Beer By the Drink- Sunday Sales (resort/restaurant)
_____	$15.00	*RBDC	Spirits, Wine & Beer By the Drink- Caterer
_____	$15.00	*5BWC	Beer & Light Wine By the Drink- Caterer
_____	$37.50	*OPT	Original Package Liquor- Tasting (retail)
_____	$37.50	RBDP	Picnic (not for profit organizations ONLY)

For Caterer's License: Name of Event_____
Address for Event _____
Dates of Event _____

***** = Secondary License Type (requires a primary license to qualify).

STATE OF MISSOURI
COUNTY OF WEBSTER

_____, being duly sworn, deposes and states on his/her oath that the facts contained in the above application are true and correct according to his/her best knowledge and belief.

Applicant Signature: _____

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

_____
Notary Public

For Office Use Only *(please circle one)*

I have investigated the above named applicant(s) and recommend **for** / **against** approval of this license.

_____ _____
Signature – Chief of Police – City of Marshfield Date

Liquor License Application

MANAGING OFFICER INFORMAITON- *the individual engaged in the day-to-day management of the business. The owner does not need to fill this out if they are the managing officer.*	
Managing Officer Name	
Date of Birth	
Driver's License #	
Social Security #	
Physical Address	
Phone Number	

Are you a native born or naturalized citizen of the United States? Yes No
If not naturalized, give immigration document number: _____

Have you ever been convicted of any violation of any ordinance of the City of Marshfield, Missouri, or of any other municipality? Yes No
If yes, what charge and date of charge: _____
Location of charge: _____

Have you ever been convicted of any criminal offense against the laws of any State or the Federal government. Yes No
If yes, what charge and date of charge: _____
Location of charge: _____

Have you ever before been licensed to sell intoxicating liquor? Yes No
If yes, state when, where, and whether you have ever had a revocation of a license:
_____

MANAGING OFFICER RESPONSIBILITIES:

I, as the Managing Officer, have determined, to the best of my ability, that all answers on this application are true and accurate. On behalf of the business, I acknowledge and agree to the following as a condition of obtaining and retaining a liquor license:

a) I will report any change in the managing officer, change in ownership, change in location, and any felony conviction within 10 working days to the Marshfield City Clerk.
b) I understand that if any answers made herein are false, the liquor license may be revoked or suspended, and the license holder may also be fined or disciplined in some other way;
c) I agree to have the licensed establishment abide by the provisions of Chapter 311, RsMo State Statues, the Rules & Regulations of the Mo. Div. of Alcohol and Tobacco Control, and Chapter 600 of the Marshfield Municipal Code pertaining to alcohol sales and related conduct.
d) and I acknowledge by my signature below that I accept responsibility for any citation issued by the city for violation by the business of any provision of Chapter 600 of the Marshfield Municipal Code or Chapter 311 of the Revised Missouri State Statutes.

I, (managing officer) _____, have read this application and fully understand my responsibilities as the managing officer.

Managing Officer Signature: _____

Name of Business: _____