

CITY OF DICKINSON

Renewal of Liquor License

For Year 2021

- Application for: _____ Commercial On-Sale/Off-Sale (\$3,000)
_____ Lodge or Club (\$3,000)
_____ Motel or Hotel (\$3,000)
_____ Microbrewery/Distillery (\$700)
_____ Military Club Beer and Wine Licenses (\$700)
_____ Restaurant On-Sale (\$2,500)
_____ Restaurant Beer and Wine (\$2,000)
_____ Beer Only (\$700)
_____ Beer and Wine Concession Licenses (\$550)
_____ Sunday Permit (All on-sale establishments must check Sunday Permit.
Optional only for off-sale establishments. See paragraph 5, below)

The undersigned hereby applies for the license or licenses checked above, and agrees, if granted a license, to promptly advise the city of any changes in the information contained in this application. The undersigned further acknowledges that this is a renewal of a license previously granted to the licensee, and that the undersigned is bound by all of the representations and statements made in the previous liquor license applications.

1. NAME OF BUSINESS ESTABLISHMENT: _____
MAILING ADDRESS: _____ TELEPHONE NUMBER _____

2. PROPOSED LICENSEE: (Please complete either "a" or "b" below)

(a) **Individual:**

Name: _____ Male: _____ Female: _____

Address: _____

Date of Birth: _____ Social Security No: _____

Driver's License Number: _____

(b) **Corporation:**

Name of Corporation: _____

Date of Incorporation: _____ State of Incorporation: _____

Names and addresses, DOB, SS# and Drivers License # of officers, directors and proposed manager: _____

Percentage of stock ownership of each director, officer, and proposed manager: _____

3. BUILDING LAYOUT: **Please provide a layout of the entire building clearly showing the licensed premises, which is where you plan to mix and/or dispense alcohol.** Has the layout of the licensed premises changed since last license renewal? Yes ___ No ___.

4. GENERAL:

(a) In your initial application for liquor license from the City of Dickinson, you responded to certain questions (please refer to Appendix A on the reverse side of this application), if there has been any change in the response to any of these questions, state each change: _____

I certify that there have been no changes to the responses to the questioned listed in Appendix A _____.

(b) If renewal of license, has your business/establishment failed an alcohol compliance check(s) managed by Law Enforcement in the past year?

No _____ *Yes _____

*If yes, how many & date(s): _____

(c) Have you or any employee associated with your licensed premises been cited for allowing a Minor on Premises, Sale of an Alcoholic Beverage to a Minor or Dispensing Alcohol to a Minor within the past

year? No _____ *Yes _____ *If yes, When and where did the violation occur? _____.

(d) By signing below, the undersigned promises and agrees to abide by and obey all applicable laws of the state and all applicable ordinances of the city relating to the operation of your licensed premises and any activities conducted thereon.

(c) By signing below, the undersigned expressly consents that any police officer of the city or any person or persons duly authorized by City ordinance or state or federal law, may enter upon the premises described in this application at any reasonable hour of the day or night, and at such times they shall have free access to all portions of the property comprising the licensed premises for the purpose of inspecting such premises for any possible violation of any of the laws of the state or of any of the ordinances of the city whether they pertain specifically to the sale of alcoholic beverages or not. Such access shall be permitted for such purposes without the necessity of a search warrant.

5. The undersigned represents and warrants that the hospitality tax imposed under Section 35.125 of the Dickinson City Code has been and will continue to be collected to qualify the licensee as a qualified alcoholic beverage licensee for purposes of Sections 4.08.270 and 4.08.280 of the Dickinson City Code authorizing Event permits and Sunday permits. (This paragraph is not applicable to applicants who have not applied for a Sunday permit)

Dated this _____ day of _____, 20_____.

APPLICANT (individual)

CORPORATION:

By: _____ (President) By: _____ (Secretary)

DRIVING ABSTRACT OLN: _____ For State(s); _____

NCIC

CWIS

BCI

For State(s): _____