



CITY OF BALLWIN

APPLICATION FOR NEW LIQUOR LICENSE/S

This Application Must Be Completely Filled Out & Submitted with Payment of Fees and the St. Louis County Police Record Check (See Instruction Sheet)

Application is hereby made to the Board of Aldermen for a New Liquor License/Licenses under the name of

_____ at _____
(DBA NAME OF BUSINESS) (BUSINESS ADDRESS)

FULL

- 1. License to sell intoxicating liquor for consumption on premises where sold, including sale in original package, (Monday – Saturday). **(\$450.00)** (Sec. 3-52 (1))

FULL - SUNDAY

- 2. License to sell intoxicating liquor by the drink for consumption on the premises where sold (including sale in original package) of any restaurant bar between the hours of 9:00 A.M. and Midnight on Sunday. **(\$300.00)** (Sec. 3-55)

MALT

- 3. License to sell malt liquor or light wine, or both malt liquor and light wine at retail, by the drink, for consumption on the premises where sold, (Monday – Saturday). **(\$50.00)** (Sec. 3-52 (3))

MALT - SUNDAY

- 4. License to sell malt liquor at retail by the drink for consumption on the premises where sold, between the hours of 9:00 A.M. and midnight on Sunday. **(\$50.00)** (Sec. 3-52 (10))

PICNIC

- 5. Limited permit to sell light wine and malt liquor for consumption on the premises where sold for a church, school, civic, service, fraternal, veteran, political or charitable club or organization at a picnic, bazaar, fair or similar gathering. Such permit shall only be issued only for the day or days specified and shall not be for more than seven (7) days per fiscal year. **(\$35.00)** (Sec. 3-52 (5)) **Dates:** _____

ORGANIZATION - SUNDAY

- 6. License to sell intoxicating liquor (including sale in original package) by the drink for consumption on the premises where sold for charitable, fraternal, religious, service or veterans' organizations on Sunday between 9:00 A.M. and Midnight on Sunday. **(\$300.00)** (Sec. 3-57)

AMUSEMENT PLACE - SUNDAY

- 7. License to sell intoxicating liquor by the drink for consumption on the premises where sold (including sale in original package) of any amusement place between the hours of 9:00 A.M. and Midnight on Sunday. **(\$300.00)** (Sec. 3-52 (6))

PACKAGE

- 8. License to sell intoxicating liquor in the original package not to be consumed on the premises where sold, (Monday – Saturday). **(150.00)** (Sec. 3-52 (2))

PACKAGE - SUNDAY

- 9. License to sell intoxicating liquor in the original package not to be consumed on the premises where sold, between the hours of 9:00 A.M. and Midnight on Sunday. **(\$300.00)** (Sec. 3-52 (9))

MALT / NO RESALE OR CONSUMPTION ON PREMISES

10. License to sell malt liquor in original package, but not for resale or consumption on premises where sold. **(\$22.50)** (Sec. 3-52 (4))

WINE TASTING

11. License to conduct wine tasting on the premises by the holder of a license to sell intoxicating liquor in the original package. **(\$10.00)** (Sec. 3-58)

WHOLESALE

12. License to sell intoxicating liquor at wholesale. **(\$375.00)** (Sec. 3-52 (7))(Ord. 2229 12/91)

MANUFACTURE

13. License to manufacture, distill, or brew intoxicating liquor. **(\$350.00)** (Sec. 3-52 (8))

MANUFACTURE WINE OR BRANDY

14. License to manufacture wine or brandy. **(\$300.00)** (Sec. 3-52 (12))

AND, in support of such application, hereby submits the following information, which the undersigned applicant represents to be true. **(Leave no blanks empty. Mark "not applicable" if appropriate).**

FULL NAME OF APPLICANT: _____
(MANAGING OFFICER)

TELEPHONE NO.: () _____ () _____
DAY EVENING

RESIDENCE ADDRESS: _____
STREET

CITY STATE ZIP CODE

DATE AND PLACE OF BIRTH: _____
DATE PLACE
If foreign born, state date & place of naturalization: _____
DATE PLACE

HOW LONG HAS APPLICANT RESIDED IN THE STATE OF MISSOURI? _____

CITY, TOWN, OR VILLAGE WHERE APPLICANT PAYS TAXES: _____

IS APPLICANT A REGISTERED VOTER? Yes No If Yes: Precinct No. _____ of _____
Township in _____ County, Mo.

PRESENT BUSINESS OR OCCUPATION OF APPLICANT: _____

HAS APPLICANT EVER BEEN ENGAGED IN THE MANUFACTURE, SALE, OR DISTRIBUTION OF
INTOXICATING LIQUORS? Yes No If Yes: When? _____
Where? _____ Nature of business: _____

HAS APPLICANT EVER HAD A LICENSE TO SELL LIQUOR REVOKED? Yes No
If Yes: When? _____ Where? _____

HAS APPLICANT EVER BEEN CONVICTED OR PLEADED GUILTY TO ANY CRIMINAL CHARGE?

Yes No If Yes: Nature of charge: _____

Whether conviction or plea of guilty: _____

Date of conviction or plea: _____

In what Court? _____

HAS APPLICANT, DIRECTLY OR THROUGH ANY EMPLOYEE, OFFICER, AGENT, SUBSIDIARY, OR AFFILIATE, HAD ANY OTHER LICENSE TO SELL INTOXICATING LIQUOR? Yes No

If Yes: How many? _____ Location of licensed premises: _____
(attach separate sheet if necessary)

HAS APPLICANT ANY DIRECT OR INDIRECT INTEREST IN ANY BUSINESS OF ANY OTHER PERSON OR CORPORATION, OR OF ANY EMPLOYEE, OFFICER, AGENT, SUBSIDIARY, OR AFFILIATE THEREOF, TO SELL INTOXICATING LIQUOR AT RETAIL, BY THE DRINK, FOR CONSUMPTION ON THE PREMISES DESCRIBED IN ANY SUCH LICENSE? Yes No

If Yes, State full details: _____

LEGAL NAME OF BUSINESS: _____

DBA NAME OF BUSINESS: _____

BUSINESS ADDRESS: _____
STREET ZIP CODE

MAILING ADDRESS: _____
STREET
CITY STATE ZIP CODE

Sole Proprietorship Partnership Corporation _____

IF PARTNERSHIP:

State names & addresses of all partners (attach separate sheet if necessary) _____

IF CORPORATION:

State names & addresses of all officers (attach separate sheet if necessary) _____

Name of managing officer: _____

Precinct in which managing officer is a registered voter: _____

THE NAME, RESIDENCE ADDRESS, AND TELEPHONE NUMBER OF THE MANAGER OR PERSON IN CHARGE OF SAID BUSINESS AT THE ABOVE ADDRESS IS: _____

STATE NAMES, ADDRESSES, AND AGES OF ALL PERSONS EMPLOYED, OR PROPOSED TO BE EMPLOYED, IN THE BUSINESS FOR WHICH LICENSE IS REQUESTED (attach separate sheet if necessary):

HAS ANY SUCH EMPLOYEE OR PROPOSED EMPLOYEE, EVER BEEN CONVICTED OR PLEADED GUILTY TO ANY CRIMINAL CHARGE? _____

If so, state nature of charge: _____

Whether conviction or plea of guilty: _____

Date of conviction or plea: _____

In what Court? _____

HAS ANY SUCH EMPLOYEE OR PROPOSED EMPLOYEE, EVER HAD A LICENSE TO SELL INTOXICATING LIQUOR REVOKED ? _____

GIVE NAMES AND ADDRESSES OF ALL PERSONS, OTHER THAT THE APPLICANT, WHO HAVE, OR PROPOSE TO HAVE, ANY INTEREST IN BUSINESS FOR WHICH LICENSE IS DESIRED: _____

In what business is each such person engaged? _____

What is the nature and extent of their interest, or proposed interest? _____

GIVE NAME AND ADDRESS OF OWNER OF BUILDING IN WHICH LICENSED BUSINESS IS TO BE CONDUCTED: _____

GIVE NAME AND ADDRESS OF AGENT OF SAID BUILDING: _____

IS EQUIPMENT OF PLACE FOR WHICH LICENSE IS DESIRED, OWNED, LEASED, OR BORROWED BY THE APPLICANT? Owned Leased Borrowed

From whom leased or borrowed? _____

IS APPLICANT INDEBTED TO ANY PERSON FOR MONEY OR PROPERTY PROPOSED TO BE USED IN THE LICENSED BUSINESS? Yes No

If yes, state amount of indebtedness: _____

Name: _____ Address: _____

Business or occupation of person to whom indebted: _____

IF THERE IS A SCHOOL OR CHURCH WITHIN 300 FEET OF THE PLACE IN WHICH APPLICANT PROPOSES TO DO BUSINESS, STATE THE NAME OF EACH SUCH SCHOOL OR CHURCH, AND HOW FAR EACH IS FROM SUCH PLACE OF BUSINESS: _____

IF PREMISES ON WHICH LIQUOR IS PROPOSED TO BE SOLD IS OPERATED AS A RESTAURANT, STATE HOW LONG: _____

Name or proprietor: _____

What is sold other than food? _____

Total volume of business in dollars transacted in the last six months: \$ _____

Amount in dollars of total volume represented by food sold: \$ _____

IF PREMISES ON WHICH LIQUOR IS PROPOSED TO BE SOLD IS OPERATED AS A CLUB, STATE NAME OF CLUB: _____

Number of members: _____

Character or purpose of club: _____

Is club incorporated? Yes No Date of Charter: _____

Name, address, and business or occupation of owner of property and equipment used by club, exclusive of real estate: _____

Value of such property and equipment: _____

How is club supported? _____

STATE FULLY EVERY OTHER KIND OF BUSINESS CARRIED ON IN OTHER PARTS OF SAME BUILDING IN WHICH APPLICANT PROPOSES TO SELL INTOXICATING LIQUORS: _____

APPLICANT AGREES TO COMPLY WITH THE PROVISIONS OF THE ORDINANCES OF THE CITY OF BALLWIN, MISSOURI, RELATING TO THE REGULATION AND CONTROL OF THE MANUFACTURE, BREWING, SALE, DISTRIBUTION AND DELIVERY OF INTOXICATING LIQUOR AND MALT LIQUOR.

Licensee's Signature (and title)

Driver's License Number

Licensee's name printed

Date of Birth

Issuance of license applied for is (is not) recommended this _____ day of _____, 20____.

Chief of Police

APPROVED BY THE BOARD OF ALDERMEN this _____ day of _____, 20____.

Mayor