

***Kansas Sales Tax Number:

(Firm, Copartnership, or Association application)
APPLICATION FOR LICENSE TO RETAIL CEREAL MALT BEVERAGES
SHAWNEE COUNTY, KANSAS, _____, 200__

TO THE BOARD OF COUNTY COMMISSIONERS OF SHAWNEE COUNTY, KANSAS.

GENTLEMEN--I _____, on behalf of a firm, partnership or association (Circle the proper one) known as _____ doing business as _____

hereby apply for a license to retail cereal malt beverages in conformity with the laws of the State of Kansas, and the rules and regulations prescribed, and hereafter to be prescribed by you, relating to the sale or distribution of cereal malt beverages; and for the purpose of securing such license, I make the following statements under oath:

1. The firm, copartnership, or association is made up of the following persons whose name, residence, age, date of birth, place of birth, method of obtaining United States citizenship with the date and place of naturalization, if that is the basis of citizenship, together with the length of each person's residence within the State of Kansas and the city or county to which this application is being made, is set forth below: _____

2. I hereby certify that with regard to each of the above-named persons the following statements are true: None of them has within the last two years from this date been convicted of:

- (a) A felony
- (b) A crime involving moral turpitude
- (c) Drunkenness
- (d) Driving a motor vehicle while under the influence of intoxicating liquors
- (e) Violation of any state or federal intoxicating liquor law

In any of the above have been convicted of any of the above-specified offenses, the details are set out hereinafter.

3. (a) The premises for which the license is desired are located at _____

(b) The legal description of the premises is _____

(c) The street and number is _____

(d) The building is described as _____

(e) The business will be conducted under the name of _____

(f) The place of business will be conducted by the following manager, if not by one of the firm, partnership, or association members _____

(g) Said manager's residence, place and date of birth _____

(h) Residence in the State of Kansas in _____ County and in the City of _____ are as follows: _____

(i) He is a citizen of the United States by birth (), naturalization (), is not a citizen (). If a naturalized citizen, his place and date of naturalization are _____

(j) He has not been convicted of any of the crimes specified in number 2 above (). If he has, the details are as follows: _____

4. The name and address of the owner or owners of the premises upon which the proposed business will be conducted is _____

5. This application is for a license to retail cereal malt beverages for consumption on the premises (). For a license to retail cereal malt beverages in original and unopened containers and not for consumption on the premises ().

I, _____, one of the partners (), associates (), members of the firm (), applying for the above-named license to retail cereal malt beverages hereby agree to comply with all the laws of the State of Kansas, and all rules and regulations prescribed, and hereafter to be prescribed by you, relating to the sale or distribution of cereal malt beverages, and do hereby agree to purchase all cereal malt beverages from a wholesaler, licensed and bonded under the laws of the State of Kansas, do hereby further consent to the immediate revocation of the cereal malt beverage retail license, if any, issued pursuant to this application by the proper officials, for the violation of any such laws, rules or regulations.

(Signature and official position of individual making application)

STATE OF KANSAS, COUNTY OF SHAWNEE, SS.

I, _____

(Signature and official position)

of the _____, do

(Name of firm, copartnership, or association)

solemnly swear that I have read the contents of this application, and that all information and answers herein contained are complete and true. So help me God.

SUBSCRIBED AND SWORN TO before me this _____ day of _____, A.D. 200__

(Character of official administering oath)

My commission expires on the _____ day of _____, A.D. 20__

APPLICATION APPROVED this _____ day of _____, A.D. 200__.

By _____, Chair--Board of County Commissioners of Shawnee County, Kansas

License fee of \$ _____ is enclosed herewith