

BEAVER CITY

60 W Center Street • Beaver, UT 84713
(435) 438-2451 • Fax (435) 438-5826

APPLICATION FOR BEER LICENSE (LIQUOR SET-UP)

Name of Business _____ Phone _____

Address _____ Zip Code _____

Mailing Address _____ Zip Code _____

Name of Applicant(1) _____

Address _____ Zip Code _____

Citizenship _____ Date of Birth _____ Phone _____

*Must attach Criminal Information Sheet, and Beer Handler Permit.

Property Owner Name _____ Phone _____

Address _____ Zip Code _____

Date of Application _____ Opening Date of Business _____

Type of Organization (Check all that apply)

Corporation _____ LLC _____ Partnership _____ Proprietorship _____ New Owner _____ Change of Use _____

All Applicants, partners, officers, and directors, plus stockholder/members with 20% ownership must provide:

- 1) Name, address, and date of birth
- 2) Place(s) of residence for last 5 years
- 3) BCI background check
- 4) References

5) List of all felony and misdemeanor criminal convictions, including charge description, date of conviction, and the court.

I hereby certify that I have never been convicted of a felony, or of any violation of any law or ordinance related to alcoholic beverages, or of drunken driving, or of keeping a gambling or disorderly house.

I also certify that I have complied with the requirements and possess the qualifications specified in the Alcoholic Beverage Control Act of Utah, and that all the information I have provided in this application is true.

I agree that if a license is issued, it shall be subject to suspension or revocation as provided in Chapter 23 of the Beaver City Ordinances. I also agree to post any bonds required by the City pursuant to the terms of Chapter 23 of the Beaver City Ordinances.

Date _____

Signed by _____

Applicant Agent

DABC Approval Date _____

Council Action: Approved _____ Not Approved _____ Date _____

Make checks payable to: Beaver City Corporation

Liquor and beer license renewals shall be due annually on January 1st of each year. If paid after February 15th, a late penalty of 50% of the amount of the fee shall be added to the original amount due. If paid after April 1st, the fee shall be doubled.

BEAVER CITY CRIMINAL INFORMATION SHEET

60 W Center Street • Beaver, UT 84713
(435) 438-2451 • Fax (435) 438-5826

PLEASE NOTE: EACH OWNER OR PART OWNER OF THE APPLICANT BUSINESS MUST COMPLETE A SEPARATE "CRIMINAL APPLICATION BUSINESS SHEET."

Name of Applicant _____ Phone _____
 Address _____ Zip Code _____
 Citizenship _____ Date of Birth _____ Title _____

PLACE(S) OF RESIDENCE FOR LAST 5 YEARS

Address(1) _____
Street Address City County State Zip
 Address(2) _____
Street Address City County State Zip
 Address(3) _____
Street Address City County State Zip

Please use additional sheets for additional addresses.

REFERENCES

Name(1) _____ Date of Birth _____ Phone _____
 Address _____ Signature _____
 Name(2) _____ Date of Birth _____ Phone _____
 Address _____ Signature _____
 Name(3) _____ Date of Birth _____ Phone _____
 Address _____ Signature _____
 Name(4) _____ Date of Birth _____ Phone _____
 Address _____ Signature _____
 Name(5) _____ Date of Birth _____ Phone _____
 Address _____ Signature _____

FELONY AND MISDEMEANOR CRIMINAL CONVICTIONS

| Charge(s) | Conviction Date | Felony/Misdemeanor | Court (Name, City, State) |
|-----------|-----------------|--------------------|---------------------------|
| | | | |
| | | | |
| | | | |
| | | | |

Please use additional sheets for additional convictions.

I certify that the above information is correct to the best of my knowledge, and that I have never been convicted of a felony, any violation of any law or ordinance related to alcoholic beverages, drunken driving, or keeping a gambling or disorderly house.

Date _____ Signed by _____
Applicant

Beaver City Beer Handler Permit Application

Permit # _____

Application Date _____

Last Name _____ First Name _____ M.I. _____

Street Address _____ City & State _____ Zip Code _____

Home Phone # _____ Work Phone _____ Place of Employment _____

Date of Birth _____ SS# _____ Height _____ Weight _____ Hair Color _____ Eye Color _____

DL State _____ DL Number _____

Have you been convicted of a felony involving alcohol in the last five years? Yes No

Have you been convicted of a misdemeanor involving the sale of alcohol to a minor in the last three years. Yes No

Have you ever held a Beaver City Beer Handler Permit? Yes No

Explanation of Applications request for Beer Handler Permit:

Applicants Statement

I certify that all the answers given herein are true and complete to the best of y knowledge.

In the event of certification, I understand that false or misleading information given in my application may result in revocation of any City or County Beer Handlers Permit. I also agree that I understand, and agree to abide by the applicable laws of the State of Utah, and Ordinances of Beaver City, and Beaver County.

Signature of Applicant

Date