



CITY OF JEROME
ALCOHOLIC BEVERAGE APPLICATION

Application is hereby made this _____ day of _____, 20__ to the City of Jerome for the following license(s):

- | | | |
|--|------------|---|
| <input type="checkbox"/> Beer, consumption on premises | (\$100.00) | <input type="checkbox"/> Transfer Fee \$25.00 |
| <input type="checkbox"/> Beer, consumption off premises | (\$ 25.00) | <input type="checkbox"/> Transfer Fee \$25.00 |
| <input type="checkbox"/> Wine, consumption on premises | (\$200.00) | <input type="checkbox"/> Transfer Fee \$25.00 |
| <input type="checkbox"/> Wine, consumption off premises | (\$100.00) | <input type="checkbox"/> Transfer Fee \$25.00 |
| <input type="checkbox"/> Liquor, consumption on premises | (\$562.50) | <input type="checkbox"/> Transfer Fee \$50.00 |

This Application is for:

- Original license
 Transfer of License

In support of this Application, I certify under oath the following to be true and correct:

Business Name _____
 Business Mailing Address _____
 Business location _____
 Name of Applicant _____
 Length of Residence in Idaho _____
 Contact telephone number _____

(Complete floor plan sketch on attached Exhibit A)

Is business a partnership?

If yes, provide names, addresses and residence length of all partners:

<u>Partner name</u>	<u>Address</u>	<u>Residence length</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

Is business a corporation?

If yes, fill out corporation questionnaire attached.

The requisite fee of \$ _____, made payable to the City of Jerome, is attached to this application.

Name of business manager and residence length, if different than applicant:

Name

Residence length

I have completed and attached Exhibit B to this application, entitled "Personal Disclosure Statement."

THE UNDERSIGNED MAKES THESE STATEMENTS WITH THE KNOWLEDGE THAT ANY KNOWING MISREPRESENTATION MAY BE GROUNDS FOR TERMINATION OF A LICENSE GRANTED, OR REFUSAL OF THE LICENSE APPLIED FOR.

STATE OF IDAHO

(signature)

State of Idaho

) SS.

County of Jerome)

On this ____ day of _____ 2____, before me, the undersigned, a Notary Public in and for said County and State, personally appeared _____, known to me to be the person whose name is subscribed to the within and foregoing instrument, and who acknowledged to me that he executed the same.

IN WITNESS WHEREOF, I have hereunto set my hand and seal, the day and year in this certificate first above written.

NOTARY PUBLIC FOR STATE OF _____
RESIDING AT _____

EXHIBIT A TO LICENSE APPLICATIONS -
BEER, WINE, LIQUOR.

Provide a sketch of the premises for which license is sought. Show entire area to be licensed; adjacent streets, if any; entrances and exits; location of licenses to be displayed; bar, if any; liquor, wine or beer storage area, if any; booths and tables, if any; show the direction and distance to the nearest school, church or other places of worship, measuring from the nearest entrance of the licensed premises to the nearest entrance of the school, church or other places of worship if within 300 feet.

Drawing may be attached.

I certify that the building of which the above premise is a part conforms to all requirements of State law and regulation, as well as County and Municipal Ordinances, related to public health, safety and zoning.

Applicant

APPLICATION – Exhibit A
CORPORATION QUESTIONNAIRE, CITY LIQUOR, WINE OR BEER
LICENSE APPLICATIONS

Name of Corporation _____
DBA, if any _____
Street address _____

Officers & Directors
(May attach a separate sheet if necessary)

<u>TITLE</u>	<u>NAME</u>	<u>ADDRESS (RESIDENTIAL)</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

ATTORNEY _____
Name Address

Date of incorporation _____
Place of incorporation _____

Corporation principal office: _____

Corporation's registered Idaho agent:

DATED this _____ day of _____, 2____.

(Signature)
Title: _____

EXHIBIT B TO APPLICATIONS FOR
LIQUOR, WINE OR BEER LICENSES
(On premise consumption applicants only)

"PERSONAL DISCLOSURE STATEMENT"

Name of applicant _____

Business name and address _____

Do you own or rent business premises? _____

If you rent, attach copy of lease to this exhibit.

Home address _____

Home telephone _____

Place of birth _____

If U.S. Citizen by naturalization,

Date of naturalization _____

Interest in business (check one or more)

Sole owner

Officer

Shareholder

Manager

Partner

Do you have a direct or indirect interest in any other business licensed for the sale of alcoholic beverages?

If yes, explain: _____

Have you ever been a licensee of an alcoholic beverage, partner, director, or officer of a licensee or applicant, whose license has been denied, suspended or revoked?

If yes, explain: _____

Present and past employment (2 years back)

Employer Name City State Job Description Dates

Exhibit B - 1

Have you ever been arrested, convicted, fined, jailed or placed on probation for violation of any law?

If yes, explain fully

<u>Date of arrest</u>	<u>Place of arrest</u>	<u>Offense</u>	<u>Result</u>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Do you use any alias?

If yes, list all aliases:

HEIGHT _____

WEIGHT _____

HAIR _____

EYES _____

I have read the foregoing and upon penalty of perjury, declare each statement by me to be true and correct. I understand an investigation to corroborate these statements will be made.

DATE: _____

APPLICANT

Exhibit B - 2