

Liquor License Application

Neighborhood Services Department Regulated Industries Division

635 Woodland, Suite 2101 Kansas City, Missouri 64106 (816) 513-4561

Applicant's nam	ne					
DBA business r	name		Phone			
Business addres	SS					
		Street	City	State ZIP		
Applying as a	[] sole owner	[] corporation	[] limited liability company	[] partnership		
[] Tav gro or properties of p	ern – defined as any lass sales from alcoholication of entertainment restaurant – defined at ives 30 percent or more mediate consumption assumption. Berer – defined as any assumption away from the sale of progetore – defined as a sover-the-counter moducts such as candy, acry store – defined as cases over-the-counter moducts arange of everydetries, soft drinks, to be of its sales from progression of the sale of of th	icensed premises that select beverages and does not as an establishment having ore of its annual gross sale as compared to the annual gross sale as compared to the annual establishment whose pring the licensed premises. As epared meals and food content of the content of the licensed premises are tail store centrally featured edications as well as other commences, cleaning supplets a retail business occupy any items which includes the content of the licensed products, personal enducts other than liquor are defined as a small restricted to dry goods, apparel and the licensed products and food fined as a retail business that pring a retail business	business licensed/to be licensed is liquor by the drink which derive qualify to be categorized as a restang a restaurant or similar facility des from the sale of prepared means all gross sales of alcoholic beveral mary business is the preparation of caterer must derive 50 percent of properties of the properties of th	caurant-bar, amusement place on the premises which als and food made for ges sold for immediate of food and drinks for or more of its annual gross ses. escription medication and des but is not limited to and paperback books square feet, that primarily ek foods, confectionery, lothing, that derives at least a range of everyday items a soft drinks, tobacco es of merchandise which may furnishings, small wares, ar confections which includes age, sweet pastries, cakes and		
•	ys and hours of opera					
3. The business	s will provide the follo	owing [] breakfast	[] lunch [] dinner [] not	applicable		
[] change in [] original lid [] Sunday lid	quor license [] quor license [ing liquor licensed busine expansion of premises	ess (If there are no licensing changes, [] DBA name change [] tra er [] upgrade of license [] ma [] annual catering permit	insfer of location		
[] full sales- [] full sales- [] tasting lice [] 22% or les	by-drink by-package ense – <i>only for packa</i> ss alcoholic beverage manufacturer nfacturer	ge licenses [] n wholesaler [] n [] 2 [] w	apply) nalt liquor/light wine sales-by-drin nalt liquor sales-by-package (Sund nalt liquor sales-by-package (Sund nalt liquor wholesaler (sales to reta 2% or less manufacturer vine / brandy manufacture C.O.L. license	lay license included)		

application fee 6. If you are applying for a *Sunday license*, please indicate the license type [] Retail sales-by-drink Sunday [] Retail sales-by-package Sunday [] not applicable 7. If you are applying for an *extended hour's permit*, please indicate business type [] Retail sales-by-drink business [] Retail sales-by-drink convention hotel/motel [] **not applicable** 8. Indicate all entertainment to be provided. If applying for a change in live entertainment, or, change in the frequency of the live entertainment, indicate below [] pool table [] darts [] pinball [] jukebox [] DJ [] semi-nude dancers (must have zoning clea [] video games / amusement devices [] dancing/dance hall [] semi-nude dancers (must have zoning clearance) [] live music [] live entertainment (describe) ___ Frequency of live entertainment to be held *indoors* will be no more than _____ days per week Outdoor entertainment provided: [] DJ [] live music [] dancing [] other _____ [] live entertainment (describe) **Frequency of live entertainment** to be held *outdoors* will be no more than days per week Total number of all multi coin-operated amusement devices _____ (A multi coin-operated machine or device is one which is capable of being played by the insertion therein of more than one coin, disc or other insertion piece, or operated thereby winning free plays or free games, or for the purpose of increasing the number of free plays or free games which may be won) Total number of billiard/pool tables _____ Total number of all *other* coin-operated amusement devices _____ 9. Interior occupant capacity Exterior occupant capacity (if used for customer seating) 10. Interior square feet ______ Exterior square feet _____ how many *total* floors will be licensed? ____ Will one or more exterior patio(s) be licensed? [] yes [] no Location(s) (circle) **north** south Will one or more exterior deck(s) be licensed? [] yes [] no Location(s) north south east -----This section ONLY: Current licensees please write "on file" next to any question where applicable ------11. Managing officer's name E-mail address Home phone Work phone Mobile phone Address _____ Street ZIP 12. Do you currently or intend to employ any person who has been convicted of a felony? [] yes [] no If yes, give details 13. Do you own or intend to purchase this business? [] yes [] no If yes, provide the following information Date of purchase _____ Purchase price \$_____ 14. Do you rent or lease the premise? [] yes [] no If yes, provide the following information Landlord's name ______ Daytime Phone _____ Address Monthly rent or lease payment amount \$_____ Term of rent or lease agreement _____ 15. Property owner's name Street ----- Financial information -----16. Total investment amount to set up the proposed business \$ Source of funds _____

17. List the names of all person(s), firms or corporations that have provided or will provide money to purchase or set up

All application fees must be submitted with the application – see the corresponding checklist for the listed

	this business and indicate amounts						
18.	Does or will the former owner have any interest, directly or indirectly, in this business? [] yes [] no [] n/a						
	If yes, give details						
19.	Does your landlord have any interest, directly or indirectly, in this business? [] yes [] no [] n/a						
	If yes, give details						
20.	List all corporations, limited liability companies and partnerships for which you and all owners of this business (the members of the corporation, LLC or partnership) are members or are directly or indirectly involved						
	If the business is a corporation , complete this section						
21.	Name of corporation						
	tate of incorporation Date of incorporation						
22.	List the names and titles of all corporate officers (attach additional sheet if necessary)						
23.	List the names of all stockholders, the number of shares held, and percentage of total ownership of the corporation for each stockholder who holds more than 10 percent of the capital stock (attach additional sheet if needed)						
2.1	If the business is a limited liability company , complete this section						
24.	Name of limited liability company						
~ ~	State of organization Date of organization						
25.	List the names of all members and percentages of each LLC member's interest (attach additional sheet if needed)						
	If the business is a partnership , complete this section						
	List names of general and limited partners, and the number of units owned by each (attach additional list if necessary)						

No distiller, wholesaler, winemaker, brewer or supplier of coin-operated amusement devices or the employees, officers or agents thereof have any financial interest in the business and I will not accept from any such person(s), equipment, money, credit or property of any kind except ordinary commercial credit for liquor sold.

This application is not being made as a subterfuge to allow a person, other than myself, to obtain a license to sell alcoholic beverages in my name for his or her benefit.

I agree to promptly report any changes in the information within this application to the Manager of Regulated Industries Division.

I authorize and consent to the examination, by the Manager of Regulated Industries Division and/or his authorized representatives, of my business books, bank accounts and other records to verify the source of funds and terms under which this business is being purchased.

I agree to allow the Manager of Regulated Industries Division and/or authorized representatives to conduct necessary investigations into financial and possible criminal records at banks and police agencies respectively.

I will at all times permit the entry of any officer or investigator who may have legal authority of the purpose of inspection or search, and will permit the removal of all things and articles that may be in violation of the Code of Ordinances of the City of Kansas City, Missouri, and the laws of the State of Missouri.

I agree to comply with the provisions of Chapters 10 and 50 of the Code of Ordinances of the City of Kansas City, Missouri, and I will not violate any ordinances of the city, laws of the state or laws of the United States in the conduct of the business.

If I receive a sidewalk café permit, I will abide by section 64-168(c)(2) of the Code of Ordinances of the City of Kansas City, Missouri, as I agree to defend, indemnify, and hold harmless the city and any of its agencies, officials, officers, or employees from and against all claims, damages, liability, losses, costs, and expenses, including reasonable attorneys' fees, arising out of or resulting from any acts or omissions in connection with the operations of the applicant caused in whole or in part by the applicant, its employees, agents, or subcontractors, customers or caused by others for whom the applicant is liable, regardless of whether caused in part by any act or omission of city, its agencies, officials, officers, or employees.

I, that I have read the application and fully under and complete.		lawful age and duly sworn upon ad the information that I have pro	
Applicant's Signature		Date	
OFFICE USE ONLY	Y – DO NOT WRITE IN S	SPACE BELOW	
	INVESTIGATOR		
Application recommended for: [] Approva	al [] Disapproval	Date:	
Comments:			
Contingency and other items needed prior to is	suance of license:		
License recommended for: [] Approval		Date:	
Comments:			

Regulated Industries Division Investigator

INVESTIGATIONS SUPERVISOR							
Application recommended for: Comments:							
License recommended for:							
Comments:							
Regulated Industries Division	n Investigations Su	pervisor					
	А	SSISTANT MANAGEI	R				
Application recommended for:							
Comments:							
License recommended for:			Date:				
Comments:							
Regulated Industries Divis	ion Assistant Man	ager					
		MANAGER					
This application & license are he	reby: [] Ap	proved [] Disa	approved				
Comments:							

Date

Regulated Industries Division Manager