Application Date	Amount Received	
	License Number	

## NON-REFUNDABLE CITY OF ADAMS APPLICATION FOR LICENSE TO SERVE FERMENTED MALT BEVERAGES AND INTOXICATING LIQUORS

All questions on this application must be answered completely and accurately before it can be processed.

Failure to do so could result in a delay or even rejection of the application.

NEW \$50.00 RENEWAL (New & Renewal - Two year term, expiring NEW \$30.00 (New 1-year Expiring in even year)	in even years) (60 c	VISIONAL \$10.00	TEMPORARY (per event)	´\$10.00 <u> </u>
NAME Last	First		Middle	
ADDRESS				
ADDRESSNumber, Street & Apt.		City	State	Zip
BIRTH DATE	SOC	CIAL SECURITY		
HOME NUMBER		WORK NUMBER	· · · · · · · · · · · · · · · · · · ·	
PLACE OF EMPLOYMENT				
DO YOU HAVE A DRIVERS LICENSE LICENSE #  IF NO, EXPLAIN			EXP. DATE _	
PREVIOUS NAME OR NAMES USED:				
Last	First		Middle	
Last	First		Middle	
LIST ALL PREVIOUS RESIDENCES FOR	THE PAST TWO YEARS			
Number, Street, Apt #	City		State	Zip
Number, Street, Apt #	City		State	 Zip

	ver been convicted of any alcohony of the following as an adult?	ol beverage related of	ffenses		
A. Illegal pu	rchase, sale or providing intoxication	ating liquor or beer?		Yes	☐ No
B. Violation	of closing hours at a licensed pr	emises?		Yes	□ No
C. Any othe	r violation of laws pertaining to a	Icohol beverages?		Yes	□ No
	y Conduct or Criminal Damage of establishment?	of Property that occur	red at a	Yes	□ No
	ng a police officer while on the li Icohol beverages?	censed premises for	the	Yes	□ No
2. Have you as	s a juvenile or adult been convic	ted of:			
•	g a motor vehicle while under the ce or with a prohibited alcohol co			Yes	□ No
•	n a motor vehicle while under ag but not more than .1% (stats 34		alcohol of more	Yes	□ No
	lcohol beverages in your posses er (stats. 346.935)?	sion in a motor vehic	le as a driver or	Yes	□ No
3. Have you e	ver been convicted of a felony?			Yes	☐ No
4. Do you have	e any criminal charges presently	pending against you'	?	Yes	☐ No
•	sently have any overdue or outsta an ordinance of any county, city,	•	•	Yes	□ No
6. Have you e	ver been convicted of any misde	meanor violations?		□Yes	□ No
7. Have you e	ver been convicted of any munic	ipal code violations?		Yes	□ No
If you answered date of conviction	lyes to any of the above questions, on and penalty:	list the charge, exact lo	ocation of arresting	agency,	
APPLICANTS CO	DMMENTS:				
information shall be grounds for de abide by those la authorize the rele provide that infor	at the information provided on this app be grounds for denial of my alcohol be enial or revocation of this license. I am ws. I understand that the Police Depar ease of any and all records requested be mation to the City Council including juve the renewed before that date if I wish to	verage license. I further u aware of the laws govern tment will do a backgroun by the Police Department i enile records. I am aware	inderstand that falsific ing the sale of alcoho id check based on my in its investigation an that this license will	cation of any oll beverages application of the Police expire on Ju	r information sha and agree to . I hereby Department will ne 30, 20,
SIGNATURE OF	APPLICANT		DATE	<b>=</b>	
Chief of Police R	eview APPROVED	☐ DENIED	Dated	PAGE	2 OF 2