



**CITY OF PECULIAR
LIQUOR LICENSE
APPLICATION/RENEWAL**

Municipal Offices - 250 S. Main, Peculiar, MO 64078
Phone: 816.779.5212 Facsimile: 816.779.1004

DATE: _____ RENEWAL: YES ___ NO ___ YEAR OF LAST RENEWAL: _____

I hereby make application for a permit to sell Alcoholic Beverages at: Retail _____; Wholesale _____; Liquor by the Drink _____; Beer by the Drink (Give alcoholic content) _____; Liquor by Package _____; Beer by Package (Give alcoholic content) _____ As Sole Owner/Operator _____; Partnership _____; Corporation _____; LLC _____

1. Name of Business _____ Type of business: _____
Street Address: _____; City _____; State: _____; Zip: _____
Bus. Phone: _____; Bus. Fax: _____; Cell#: _____; Email: _____
Mailing Address (if different than above): _____; City _____; State: _____; Zip: _____
The amount of goods, wares and merchandise on hand at the time application is made: \$ _____

2. Federal Employer Identification # (or Business Owner's Social Security #) _____

3. Missouri Retail Sales License # _____

4. Full name of corporation: (If applicable) _____ Date of incorporation: _____
List name, address, date of birth, phone number & social security number for the following:
President: _____
Vice President: _____
Secretary: _____
Treasurer: _____
Managing Agent: _____

5. If Business is any type of partnership, list names, addresses, phone numbers and dates of birth of partner/partnership:

6. Applicant: _____

	First	Middle	Last	Maiden Name	Social Security
Residence:	_____				_____
	Street Address		City	State	Zip Code
Residence Phone#	_____		Date of Birth: _____	Place of Birth: _____	
Are you a U. S. Citizen? _____; if naturalized, give date and place of naturalization: _____					
Height	Weight	Color of eyes	Color of hair	Sex	Number of years in this business:
_____	_____	_____	_____	_____	_____

7. Spouse's name, address and & Social Security #: _____
Wife's Maiden Name: _____

8. Has any type of liquor license listed previously held in the City of Peculiar ever been suspended or revoked? _____. If so, please give complete details: _____

9. Have you ever made application for a liquor license that was denied by the City of Peculiar, or by the licensing authority of any state, county or city? _____. If so, please give details: _____

10. Have you or anyone interested either directly or indirectly in the premises to be licensed hereunder or the operation thereon ever been convicted of a felony and/or is not disqualified to receive a license? _____. If yes, please give complete details: _____

11. Will you be the person in active control and/or management (Managing Officer) of this business full-time? _____ If not, complete details on the planned management and persons involved: _____

Each completed Application shall be accompanied by:

- _____ Proper remittance reflecting the appropriate license fee made payable to the "City of Peculiar"
- _____ Certificate of insurance by an insurance company authorized to do business in the State of Missouri, certifying that the applicant has in force and affect the insurance required by statute.
- _____ Sales Contract or Lease covering property for liquor license requested.
- _____ Copy of Driver's License.
- _____ Certificate of "No Tax Due" from Mo Dept. of Revenue (For assistance, the business can contact the Taxation Bureau at 573-751-9268)
- _____ Copy of current "Missouri - Division of Alcohol and Tobacco Control – license" for which you are applying.

CERTIFICATION

Date: _____
 of Applicant/Principal Officer

Signature of Name

I am the person who is to be actively engaged in the actual control and management of the particular liquor establishment for which the permit is hereby sought, and that the answers and information given in this application are true and complete according to the best of my knowledge and belief.

Applicant hereby represents that the business conducted by applicant does not and will not violate any ordinance of the City of Peculiar and now complies and will continue to comply fully with the laws of the State of Missouri.

Please indicate for which Liquor License you are applying

—	Class A. \$150.00	For the sale at retail of intoxicating liquors in the original package in connection with a drugstore, Cigar and tobacco store, grocery store, a general merchandise store, a confectionary or delicatessen or a store having and keeping at least one thousand dollars (\$1,000.00) exclusive of fixtures and intoxicating liquor.
—	Class B. \$ 75.00	For the sale of malt liquor by grocers and other merchants and dealers in the original package direct to consumers, but not for resale.
—	Class C. \$52.50	For the sale of malt liquor by the drink for consumption on the premises where sold.
—	Class D. \$450.00	For the sale of all kinds of intoxicating liquor by the drink for consumption on the premises where sold. For the sale of intoxicating liquor in the original package if qualified under RSMo. Section 311.097.
—	Class E \$300.00	For the sale of all kinds of intoxicating liquor by the drink for consumption on the premises or sold on Sunday if qualified under RSMo. Section 311.097.
—	Class G \$ 90.00	For permitting the drinking or consumption of intoxicating liquors on the premises and qualifying under RSMo. 311.480.
—	Class I. \$ 32.50	For the sale of malt liquor as defined in Section 311.200, Chapter 311, RSMo., for consumption on premises where sold may be issued to any church, school, civic, service, fraternal, veteran, political or charitable club or Organization for the sale of such malt liquor at a picnic, bazaar, fair, or similar gathering. Said permit shall be issued only for the day or days named therein and it shall not authorize the sale of aforesaid malt liquor for more than seven (7) days by any said organization as described above. Event Name: _____ Event Dates: _____
—	Class J. \$300.00	For the sale of intoxicating liquors in the original package at retail on Sundays between the hours established by the Missouri State Liquor Control if the applicant holds a Class A license shall not be assignable or transferable to any other person or to any other location.