

City of Driggs

Alcohol Beverage License Renewal Application

Year _____

Check all below for which you are applying:

- | | | | | | |
|-------------------------|----------|--------------------------|---------------------------|----------|--------------------------|
| Liquor | \$200.00 | <input type="checkbox"/> | Retail sale of Beer | \$ 12.50 | <input type="checkbox"/> |
| Wine by the drink | \$50.00 | <input type="checkbox"/> | Retail sale of Wine | \$ 50.00 | <input type="checkbox"/> |
| Beer by the drink | \$50.00 | <input type="checkbox"/> | License Transfer | \$100.00 | <input type="checkbox"/> |

Name of Applicant & Contact Person:

Name of Business:_____

Physical Address of Business:_____

Mailing Address of Business:_____

Phone Number of Business:_____

I hereby certify the above statements to be true, complete and correct to the best of my knowledge. I agree to abide by the terms and conditions of the City Ordinance and any rules or regulations hereafter promulgated by the City, County or the State of Idaho in regards to the sale of alcoholic beverages permitted by this application. I further certify that I have applied for and received the Idaho State Liquor License (a copy of which is attached) and the Teton County Liquor License (a copy of which is attached).

Applicant's signature: _____ Date: _____

Subscribed and sworn to before me this _____ day of _____, 20_____

City Clerk (OR)

Notary Public

Residing at: _____:

My Commission Expires _____

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City Use Only: Paid by cash or check # _____ Amount received: