

City of Grafton, ND

APPLICATION FOR CITY RETAIL ALCOHOLIC BEVERAGE LICENSE **(INDIVIDUAL)**

PLEASE TYPE OR PRINT

For the period _____, 20____ to _____ December 31 _____, 20____

The undersigned applicant states that the following information is true and correct.

YOUR NAME _____ HOME PHONE _____

NAME OF BUSINESS _____ BUSINESS PHONE _____

BUSINESS ADDRESS _____
(Street Address, City, Zip)

MAILING ADDRESS _____
(Street or P.O. Box, City, Zip)

NAME OF MANAGER _____ HOME PHONE _____

TYPE OF LICENSE REQUESTED:

_____	On- and Off-Sale Liquor & Beer	\$2,000.00/year
_____	Off-Sale Liquor & Beer (limit of 3)	\$1,150.00/year
_____	Lodge, Annual (General On- and Off-Sale Liquor & Beer)	\$1,000.00/year
_____	On-Sale Beer	\$250.00/year
_____	On-Sale Wine	\$250.00/year
_____	Club, Short-Term (Monthly)	\$40.00/month

FEES MUST BE FURNISHED IN THE FORM OF A CERTIFIED CHECK OR CASHIER'S CHECK

1. Are you presently licensed by this office _____

If YES, give license number _____

2. Is Business being taken over from another _____

If YES, who is the former owner _____

3. Beginning date of your operation of this business _____
4. Legal description of premises where sales are proposed to be made _____
floor of the building located on Lot(s) _____, Block _____
in _____ Addition to the City of Grafton, North Dakota.
5. Do you own the building and premises? _____
If NO, give owner's name and address: _____
If NO, give terms of lease _____
If requested, you agree to furnish the City with a copy of lease.
6. If this business is a partnership, list name and address of each partner _____

7. If you own the building and premises described in this application, are there any delinquent and unpaid property or real estate taxes? _____ If YES, describe: _____
8. Have you, your partner or manager been convicted of a felony or misdemeanor within the past year? _____ If YES, explain fully _____
9. Are you, your partner and manager, all legal residents of the United States and persons of good moral character? _____
10. Have you any agreement or understanding, or intend to have any agreement or understanding, to obtain this license for any other person, partnership or corporation, or to obtain it for any other than the specific use of the applicant? _____ If YES, give details: _____

11. Do you lease, or intend to lease, the premises to any other person, partnership or corporation for the sale of alcoholic beverages? _____
12. Have you any interest whatsoever, directly or indirectly, in any other liquor establishment in or out of the State of North Dakota? _____ If YES, give details: _____

13. Using the space on the back of this page: Draw a clear and understandable floor plan, or include a diagram or blueprint, of the premises to be licensed.
14. The Applicant hereby agrees to furnish, upon request, such other information that the City may require to act upon this application.
15. The Applicant hereby agrees and consents to allow City officials and police officers to enter the premises described in the application at reasonable times for inspections.
16. The Applicant hereby assures that the applicant has or agrees to obtain all necessary and required permits and/or licenses from the State of North Dakota or the United States.
17. The Applicant affirms that the applicant possesses the qualifications required by City ordinances and State and Federal laws to conduct the business for which this license is sought.
18. The Applicant hereby assures that the proposed sale at the described premises complies with the zoning requirements of the City.
19. The Applicant hereby agrees to abide by existing Ordinances of the City of Grafton applicable to the license being applied for, and future amendments to such Ordinances.

Please enclose with your application a completed copy of the Personal Information Form. A copy of the personal information form submitted with the State application is acceptable.

Please return to: City Auditor, 5 East 4th Street, Box 578, Grafton, ND 58237.

Date: _____ 20____

 Applicant's Signature

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

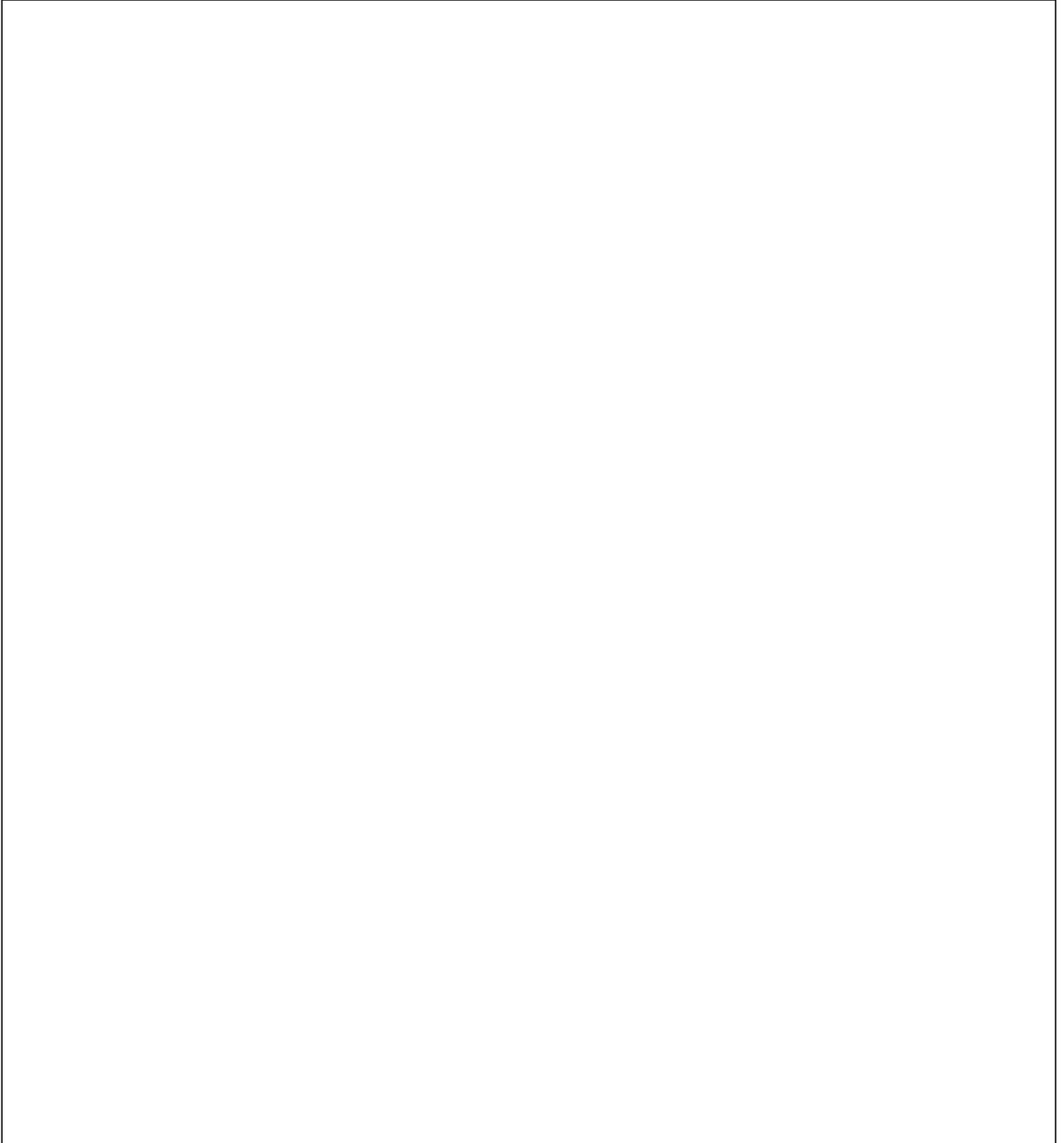
 Notary Public for _____ County, North Dakota.
 My commission expires _____

FOR CITY USE ONLY

- | | |
|---|--|
| <input type="checkbox"/> Application Complete (floor plan included) | <input type="checkbox"/> License Fee Submitted |
| <input type="checkbox"/> Personal Forms Submitted | <input type="checkbox"/> Application given to Police Dept. _____ |

Alcoholic Beverage Floor Plan

Using the space below: Draw a clear and understandable floor plan of the premises to be licensed. Show all exits, bars, dining areas (if any), beverage coolers and beverage storage areas. Indicate which are solid walls, half walls, dividers, and moveable partitions. Use a different color to outline the area(s) to be used for the sale and/or consumption of alcoholic beverages. This diagram should include outside patio areas, smoking shelters, etc.

A large, empty rectangular box with a thin black border, intended for drawing a floor plan. The box is currently blank, providing space for the user to create a clear and understandable floor plan of the premises to be licensed, including exits, bars, dining areas, beverage coolers, storage areas, and other features as specified in the instructions above.