



## ALCOHOL BEVERAGE LICENSE APPLICATION CHECKLIST

**PLEASE NOTE:** The following information must be submitted with your application to be considered for a city of Hailey Alcohol Beverage License.

### ALL APPLICANTS:

- A copy of your State of Idaho Alcohol License.
- A copy of your Blaine County Alcohol License.

If any of the following have *substantially changed*, please provide an up to date copy of each.

1. A detailed statement of the assets and liabilities of the applicant.
2. A copy of the articles of incorporation and bylaws of any corporation; the articles of association and bylaws of any association; or the articles of partnership for any partnership.
3. A certified copy of the lease showing that property owner consents to the sale of liquor by the drink on such premises, if the applicant is not the owner of the property.

I hereby certify that the above documents (1-3) have not *substantially* changed and the information on file from 2013 is the most current and up to date.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

*Should any information on this application be subject to change, such change must be reported in writing to City Hall as outlined in Section 5.04.040 of the Hailey Municipal Code.*

CITY OF HAILEY ■ 115 MAIN ST. S., SUITE H ■ HAILEY, IDAHO 83333 ■ 788-4221



# ALCOHOL BEVERAGE LICENSE APPLICATION

**APPLICATION FOR:**

Liquor \$562.50  \_\_\_\_\_  
 Wine by the Drink \$200.00  \_\_\_\_\_  
 Beer by the Drink \$200.00  \_\_\_\_\_  
 Grocery Sale of Wine \$200.00  \_\_\_\_\_  
 Grocery Sale of Beer \$50.00  \_\_\_\_\_

**APPLICATION IS:**

New License  
 Renewal

**TOTAL DUE:** \_\_\_\_\_

Applicant Name: \_\_\_\_\_

Business Name: \_\_\_\_\_

Business Physical Address: \_\_\_\_\_

Business Mailing Address: \_\_\_\_\_

Business Phone Number: \_\_\_\_\_

Property Owner (if different from applicant): \_\_\_\_\_

*(Applicant must attach certified copy of lease showing that owner consents to sale of alcohol on premises.)*

I hereby certify that the above statements are true, complete and correct to the best of my knowledge. I further certify that I have applied for and received the Idaho State Liquor License (copy attached) and the Blaine County Liquor License (copy attached).

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

Subscribed and sworn to before me this  
\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
City Clerk or Designee

<b>Official Use Only</b>
State License No. _____
County License No. _____
City License No. _____
Date Approved by Council _____
_____ Chief of Police



## PERSONAL AFFIDAVIT IN SUPPORT OF ALCOHOL BUSINESS LICENSE

Full Name: \_\_\_\_\_

SSN: \_\_\_\_\_ DOB: \_\_\_\_\_

Business Address: \_\_\_\_\_ Business Phone: \_\_\_\_\_

\_\_\_\_\_

Home Address: \_\_\_\_\_ Home Phone: \_\_\_\_\_

\_\_\_\_\_

I am or will be:      Sole Owner       Partner       Officer   
                                 Director       Stock Holder       Manager

Do you have any direct or indirect interest in any other business for the sale of alcoholic beverages?

Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please explain: \_\_\_\_\_

\_\_\_\_\_

Have you ever had an alcohol license denied, suspended or revoked?

Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please explain: \_\_\_\_\_

Have you within the last three (3) years been convicted of any violation in any of these United States relating to the importation, transportation, manufacture or sale of alcoholic liquor or beer?

Yes \_\_\_\_\_ No \_\_\_\_\_

Have you within the last five (5) years been convicted of, paid a fine, been placed on probation, received a deferred sentence or withheld judgment, or completed any sentence of confinement for any felony?

Yes \_\_\_\_\_ No \_\_\_\_\_

If yes, please explain: \_\_\_\_\_

I have read all of the above, and declare under penalty of perjury that each and every statement made is true, correct and complete.

\_\_\_\_\_  
Applicant Signature

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## BUSINESS QUESTIONNAIRE

Business Name: \_\_\_\_\_  
DBA Name: \_\_\_\_\_  
Physical Address: \_\_\_\_\_

### Officers and/or Directors:

Title: \_\_\_\_\_ Name: \_\_\_\_\_  
Address: \_\_\_\_\_

Title: \_\_\_\_\_ Name: \_\_\_\_\_  
Address: \_\_\_\_\_

Title: \_\_\_\_\_ Name: \_\_\_\_\_  
Address: \_\_\_\_\_

### Stockholders

Name: \_\_\_\_\_ Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Address: \_\_\_\_\_

Name: \_\_\_\_\_ Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Address: \_\_\_\_\_

Name: \_\_\_\_\_ Name: \_\_\_\_\_  
Address: \_\_\_\_\_ Address: \_\_\_\_\_

I hereby certify that each officer, director and stockholder is the real party in interest with respect to his portion and is not acting directly or indirectly as an agent, employee or representative to any other person not reported to the board.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Title