

**CITY OF LAWRENCE, KANSAS
ALCOHOL LICENSE APPLICATION**

Application is hereby made for a _____ Class A Club (\$250.00); _____ Class B Club (\$250.00); _____ Drinking Establishment (\$250.00); _____ Caterer (\$250.00); or _____ Retail Liquor (\$300.00) license from the City of Lawrence.

Name of Individual Owner, Partnership or Corporation: _____

IF CORPORATION OR PARTNERSHIP, PLEASE ATTACH A LISTING OF NAMES, ADDRESSES, AND BIRTHDAYS OF ALL OFFICERS/PARTNERS.

Name of Business to be licensed: _____

Business Address: _____ Business Phone: (____) _____

Street Address: _____

City: _____ State: _____ Zip: _____

Premises are: _____ Leased: _____ Owned

If premises are leased, please attach a copy of your current lease.

Mailing Address: _____

City: _____ State: _____ Zip: _____

THE PLACE OF BUSINESS WILL BE MANAGED BY:

Name: _____ Phone: _____

Home Address: _____

City: _____ State: _____ Zip: _____

Place of Birth _____ Date: _____

Length of Kansas Residency: _____

I hereby certify the above information to be true and correct to the best of my knowledge. I have received a copy of Chapter IV of the City Code of the City of Lawrence. I have attached a copy of the current license from the State of Kansas and the appropriate fee has been paid to the City Clerk's Office. It is understood that should ownership or location of this establishment change, the license is null and void, these fees are not refundable or prorated. It is further understood that in the event this license is not approved by the City Commission of Lawrence, Kansas, these fees are not refundable or prorated.

Applicant's Name (Printed)

Applicant (Signature)

RECEIVED THIS _____ DAY OF _____, 20_____.

APPROVED BY THE CITY COMMISSION ON THE _____ DAY OF _____, 20_____.

Administrative Services