



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:

1. A copy of your State of Idaho Alcohol License.
2. A copy of your Blaine County Alcohol License.

Liquor License Applicants:

In addition to items 1 and 2, above, Liquor License applicants must also provide:

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.

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.



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 | _____ |

TOTAL DUE: _____

APPLICATION IS:

New License
 Renewal
 Transfer

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 _____

Notary Public OR City Clerk

Residing at: _____

My Commission Expires _____

| |
|--------------------------------|
| Official Use Only |
| State License No. _____ |
| County License No. _____ |
| City License No. _____ |
| Date Approved by Council _____ |
| _____ Chief of Police |

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



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

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

Notary Public Residing at My Commission Expires

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CORPORATION QUESTIONNAIRE

Corporation Name: _____
Business 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

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

Notary Public Residing at My Commission Expires