

Application For Alcoholic Beverage Licenses

New Application: _____ Renewal Application: _____

Name: _____ Date of Application: _____

Residence: _____ Social Security #: _____-_____-_____

Driver License #: _____

Telephone #: (_____) _____ Date of Birth: _____

Is applicant a citizen of the US? Yes No How long has applicant been a resident of
Bonner Springs? _____ State of Kansas? _____ Wyandotte Co ? _____

Location for which license is desired _____

Business Name _____

Owner of premises _____

State type & length of lease of premises _____

Is copy of lease attached? Yes No Name of Business _____

State Type of Ownership _____

If a corporation, list Board of Directors _____

Registered Agent _____

Registered Agent Date of Birth: _____ Social Security No. _____

If corporation, Article of Incorporation & Bylaws attached? Yes No

If partnership, list Partners _____

If partnership, Partnership Agreement attached? Yes No

Has applicant attached Rules of the Business/Club? Yes No

Has applicant ever experienced an instance when a state license has been revoked or denied to
operate a Private Club or Cereal Malt Beverage or Liquor License, as required by the State of
Kansas? Yes No

Has applicant ever been convicted of a felony? Yes No

Has applicant ever been convicted or pleaded guilty to a violation of the Liquor Laws of the city
of Bonner Springs, Kansas, or the State of Kansas? Yes No

Has applicant ever been convicted or pleaded guilty to any felony or misdemeanor opposed to
decency and morality? Yes No

Has applicant been adjudged guilty of drunkenness within two years immediately preceding the date of making this application? o Yes o No

Has applicant been adjudged guilty of driving a motor vehicle while under the influence of intoxicating liquors within two years immediately preceding the date of making this application? o Yes o No

Has any previous license relating to alcoholic liquors, municipal, state or federal, issued to applicant been revoked? o Yes o No or denied? o Yes o No If yes, when and where?

Is applicant's place of business to be conducted by a manager or agent? o Yes o No If yes, give manager/agent's name, age, and residence: _____

Has applicant purchased or has he in his possession a special tax stamp from the Federal Government, taxing the sale of alcoholic liquor? o Yes o No

LICENSE FEE ENCLOSED \$ _____

I, _____, the above named applicant, hereby agree to comply with all the laws of the State of Kansas, and all rules and regulations prescribed by you, and here-after to be prescribed by you, relating to the operation of my business, and do hereby further consent to the immediate revocation of my license by the proper officials, for any violation of such laws, rules or regulations.

Signature of Applicant

STATE OF KANSAS, COUNTY OF WYANDOTTE, SS

I, _____, the above named applicant, do solemnly swear that I have read the contents of this application and that all information and answers herein contained are complete and true.

Signature of Applicant

Subscribed & sworn before me this _____ day of _____, _____.

Notary Public

My commission expires _____

Application approved this _____ day of _____, _____.

By _____, _____ of the City Bonner Springs, Kansas.
(Official Position)

PERSONNEL INFORMATION

Name of organization: _____ Address: _____

List all personnel who are involved in the mixing or dispensing of alcoholic liquor. This includes club manager. Questions contained hereafter pertain to each person listed.

NAME	ADDRESS	POSITION	DATE OF BIRTH
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

1. Is any person under the age of 21 years? Yes No (if yes, which person/persons?)

2. Has any person been adjudged of a felony or of any crime involving a morals charge? Yes No (if yes, which Person?) _____
(Morals charge includes prostitution; procuring any female person; soliciting of a child under 18 years of age for any immoral act involving sex; possession or sale of narcotics or marijuana or amphetamines or barbiturates; rape, incest; gambling; illegal cohabitation; adultery; bigamy; crimes against nature.)

3. Has any person been adjudged guilty of a violation of any intoxicating liquor law within two years of this date? Yes No (if yes, which person?)

I agree that whenever a new person is employed by the above-named club or organization for the purpose of mixing or dispensing alcoholic liquor on other than a temporary basis, the club or organization will provide the City of Bonner Springs within five (5) days of such employment the information contained in this sheet pertaining to such employee.

PERSONAL OATH

STATE OF KANSAS, COUNTY OF WYANDOTTE, SS:

_____, being first duly sworn, upon oath deposes and states:
That he is the authorized agent of the above named organization; that he has read the above information sheet, knows the contents thereof and that all statements therein contained are true.

Signature of Applicant

Subscribed in my presence and sworn to before me this _____ day of _____, _____.

Notary Public

My commission expires _____