

CITY OF WASHBURN  
APPLICATION FOR RETAIL  
ALCOHOLIC BEVERAGE LICENSE

CHECK ONE:  New License Application  Renewal  Transfer  Relocation

NOTE: This application must be made under oath and be accompanied by required fees.

CHECK ONE:  CLASS I (On-Sale and Off-Sale Liquor and Beer)  
 CLASS II (On-Sale Liquor and Beer)  
 CLASS III (Off-Sale Liquor and Beer)  
 CLASS IV (Off-Sale Beer Only)  
 CLASS V (Clubs and Lodges)  
 CLASS VI-A (Eating Establishment On-Sale Alcoholic Beverages)  
 CLASS VI-B (Eating Establishment Beer and Wine Only)  
 CLASS VII (Catering Business Beer and Wine Only)

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

NAME OF APPLICANT, PARTNERSHIP OR CORPORATION \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_ PHONE \_\_\_\_\_

DATE OF INCORPORATION \_\_\_\_\_ STATE \_\_\_\_\_

IF OUT OF STATE CORPORATION, IS CORPORATION REGISTERED IN NORTH DAKOTA? \_\_\_\_\_

NAME AND ADDRESS OF REGISTERED AGENT \_\_\_\_\_

CERTIFICATE NUMBER \_\_\_\_\_ PHONE \_\_\_\_\_

NAME OF BUSINESS FOR WHICH LICENSE IS REQUESTED \_\_\_\_\_

STREET ADDRESS \_\_\_\_\_

LIST ALL OFFICERS OR DIRECTOR OF CORPORATION OR PARTNERS, AND % OF OWNERSHIP (Attach separate sheet, if necessary)

NAME \_\_\_\_\_ ADDRESS \_\_\_\_\_ % OWNERSHIP \_\_\_\_\_  
DOB \_\_\_\_\_ DRIVER'S LIC NUMBER \_\_\_\_\_  
OCCUPATION \_\_\_\_\_ TITLE \_\_\_\_\_  
ADDRESS (City and State) \_\_\_\_\_ OCCUPATION LAST 5 YEARS \_\_\_\_\_

NAME \_\_\_\_\_ ADDRESS \_\_\_\_\_ % OWNERSHIP \_\_\_\_\_  
DOB \_\_\_\_\_ DRIVER'S LIC NUMBER \_\_\_\_\_  
OCCUPATION \_\_\_\_\_ TITLE \_\_\_\_\_  
ADDRESS (City and State) \_\_\_\_\_ OCCUPATION LAST 5 YEARS \_\_\_\_\_

NAME \_\_\_\_\_ ADDRESS \_\_\_\_\_ % OWNERSHIP \_\_\_\_\_  
DOB \_\_\_\_\_ DRIVER'S LIC NUMBER \_\_\_\_\_  
OCCUPATION \_\_\_\_\_ TITLE \_\_\_\_\_  
ADDRESS (City and State) \_\_\_\_\_ OCCUPATION LAST 5 YEARS \_\_\_\_\_

MANAGER NAME \_\_\_\_\_ ADDRESS \_\_\_\_\_  
DOB \_\_\_\_\_ DRIVER'S LIC NUMBER \_\_\_\_\_  
OCCUPATION \_\_\_\_\_ TITLE \_\_\_\_\_  
ADDRESS (City and State) \_\_\_\_\_ OCCUPATION LAST 5 YEARS \_\_\_\_\_

LIST NAMES/ADDRESS/PERCENTAGE OF OWNERSHIP OF ANY OTHER STOCKHOLDER WITH 20% OR MORE STOCK \_\_\_\_\_

OWNER OF BUILDING OR PREMISES \_\_\_\_\_

NOTE: If owner is other than applicant, attach a copy of lease or rental agreement. Also, all applicants must attach a copy of a blueprint or diagram on a separate sheet 11" x 8 1/2" in size, showing 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 movable partitions. Outline in different color ink, the area to be used for the sale and/or service of alcoholic beverages if entire building is not so used. Include the direction "North" on the diagram.

1. Are manager and all partners legal residents of the United States and the State of North Dakota, and are all officers or directors legal residents of the United States? \_\_\_\_\_ If not, explain \_\_\_\_\_
2. Have any of the persons listed above been convicted of any crime within the past five years? \_\_\_\_\_ If yes, list all convictions, dates, location and disposition or sentence of each \_\_\_\_\_
3. Does the building meet all state and local sanitation and safety requirements? \_\_\_\_\_
4. a. If a transfer or change in ownership or management, list former owner and manager \_\_\_\_\_  
b. If a transfer or change in ownership, former owner must sign below:  
I hereby consent to the requested transfer of this license:  
\_\_\_\_\_, Date \_\_\_\_\_
5. Has applicant, or any of the persons listed above, within the past five years had any license to engage in the sale of alcoholic beverages revoked or suspended? \_\_\_\_\_ If yes, give details \_\_\_\_\_
6. If new application, has applicant or any of the persons listed above, engaged in the sale or transportation of alcoholic beverages previously? \_\_\_\_\_ If yes, give details \_\_\_\_\_
7. Has applicant, or any of the persons listed above, within the past five years, had an application for any federal, state or local license of any type rejected or denied? \_\_\_\_\_ If yes, give details \_\_\_\_\_
8. Do any persons, other than applicant or persons listed above, have any ownership interest in the business? \_\_\_\_\_ If yes, give details \_\_\_\_\_
9. Is there any agreement or understanding, or proposed agreement or understanding to obtain the license for another, or to operate the business for another, or as an agent for another? \_\_\_\_\_ If yes, give details \_\_\_\_\_
10. Has the business been sold or leased, or is there any intention to sell or lease, the business to another? \_\_\_\_\_ If yes, give details \_\_\_\_\_
11. Has the applicant, or any of the persons listed above, any interest in whatsoever, directly or indirectly, any other licensed liquor establishment within or without the State of North Dakota? \_\_\_\_\_ If yes, give details \_\_\_\_\_
12. Will the applicant, or any of the persons listed above, be engaged in any other business other than the sale of liquor under the license applied for? \_\_\_\_\_ If yes, give details \_\_\_\_\_
13. Have all property taxes and special assessments currently due been paid? \_\_\_\_\_ If not, explain \_\_\_\_\_

I hereby agree and consent that authorized officers or representatives of the city may enter the premises licensed at any time to inspect the same and records of the business, and hereby waive any and all rights under the Constitution of the United States or State of North Dakota relative to searches and seizures without issuance of or use of a search warrant, and agree that I will not claim such immunities, and that such search, inspection and seizure may be made at any time without a warrant.

I agree that I will not transfer to sell this license, if granted, without the prior approval of the governing body and in accordance with applicable ordinances.

I also agree that should any of the information contained in this application change within the period of the license, if granted, that I will inform city officials immediately and furnish such details as may be requested by such officials concerning any such changes. I also agree that should there be a change in ownership or management during the period of the license, prior approval of the Board of City Commissioners is required. I further agree that misrepresentation, false statement, or omission in this application shall be grounds for rejection of said application or for revocation or suspension of any license granted.

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

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

\_\_\_\_\_  
Notary Public

-----For City Use Only-----

APPROVED: \_\_\_\_\_

DENIED: \_\_\_\_\_

DATE: \_\_\_\_\_

PRESIDENT: \_\_\_\_\_

AUDITOR: \_\_\_\_\_

## **LIQUOR LICENSE SITE DIAGRAM REQUIREMENTS**

- Site diagrams are to be submitted on a plain sheet of paper, 8 1/2 x 11 inch size. There shall be one -inch margin left clear on all edges of the diagram.
- The licensed area shall be identified within the margins.
- The agency name shall be included on the diagram.
- The direction "North" shall be included on the diagram.
- The interior design of the licensed area shall be represented. This should include entrances, exits, interior doors, windows, tables, coolers, storage offices and room dividers.
- The diagram may be hand drawn, but it must be neat and reasonably accurate. Do not submit copies of construction blueprints.
- If the licensed site is part of a larger complex such as a restaurant, areas such as mixing, serving and storage must be identified.
- Do not use reference or hi-lite markers to identify areas as they do not reproduce when copied.