



COUNTY OF CASSIA

COURTHOUSE
1459 Overland Avenue
Burley, Idaho 83318

LARRY A. MICKELSEN
Clerk of the District Court

Phone: 208-878-5240
Fax: 208-878-8825

To Whom It May Concern:

Enclosed please find the application for your Beer and Liquor License. Please complete the enclosed form. Read over the application carefully as we are requiring additional information from you. Note that this additional information is required every year. We do not file these licenses by name, only by the year of issuance.

The fees remain the same for the new license.

We require a copy of your new State License, copies of Articles of Incorporation or copies of Partnership Agreement, copies of any Lease Agreement, also a drawing of the floor plan of the area where your license is being used and location of coolers and the address where the business is located.

The licenses run from August 1 of the year thru July 31st of the following year. Example: August 1, 2006 thru July 31, 2007.

If you have any questions or concerns please call 208-878-5240 and we will be happy to answer any questions that you may have.

We are looking forward to being assistance during this licensing period. Our offices are open 8:30 to 5:00 p.m. Monday through Friday, except on National Holidays.

Sincerely,

/s/ Larry A. Mickelsen

Larry A. Mickelsen, County Clerk.

**LIQUOR/BEER/WINE APPLICATION
CASSIA COUNTY**

For: _____ [] Corporation: Attach Copy of Articles of Incorporation
Application: _____ [] Partnership: Attach Copy of Partnership Agreement
Transfer: _____ [] Individual: _____

Name of Business: _____

Mailing Address: _____

City, State, Zip: _____

The undersigned hereby makes application to the County of Cassia, State of Idaho for the following licenses to sell alcoholic beverages for

- | | |
|---|--|
| () Burley Liquor License\$187.50 | () Beer License |
| () Albion Liquor License\$75.00 | () Bottled or Canned, Off Premises \$25.00 |
| () Declo Liquor License \$75.00 | () Bottled or Canned, On Premises..... \$75.00 |
| () Malta Liquor License..... \$75.00 | () Draft, Bottled, or Canned On Premises.....\$100.00 |
| () Recreation Parks Liquor License \$75.00 | () County Wine License (Bottled - Retail) \$100.00 |
| | () County Wine License (By the Drink)\$100.00 |

Applicant is the holder of State of Idaho License(s) (attached); Dated _____

Liquor License #: _____

Beer License #: _____

Wine License #: _____

License fee for Liquor/Beer/Wine enclosed: \$ _____

Owner Birth Date: _____ Home Telephone Number: _____

Owner's Social Security Number: _____ Business Telephone Number: _____

Name, address and occupation of the applicant for the three (3) years preceding the date of application: _____

Drawing of the floor plan, a description of the room or rooms in which the business is to be conducted, and a description of the lot, block, or street number of the building where such room or rooms are located. Attach additional pages as necessary:

Name/names of the owner/owners of such premises, **attach a copy of the lease** if not personally owned: _____

Interest of the applicant in the premises where the business is to be conducted: _____

Name/names of any other person/s other than the applicant who has financial interest or manages the business: _____

Is the applicant (and/or the applicant's business associates):

1. Citizens of the United States and bona fide resident(s) of the State of Idaho for a period of not less than 30 days, prior to the date of this application?
() Yes () No
2. Over the age of 19?
() Yes () No
3. Of good moral character, and have never been convicted of any violation of law regulating, governing or prohibiting the sale of intoxicating Alcohol/Beer/Wine?
() Yes () No

(IF "NO" WAS ANSWERED TO ANY OF THE ABOVE QUESTIONS, PLEASE ATTACH WRITTEN EXPLANATION)

4. Ever been convicted of a felony? () Yes () No

(IF "YES" WAS ANSWERED TO QUESTION # 4, PLEASE ATTACH WRITTEN EXPLANATION)

Applicant hereby affirms that he/she/they are eligible and has/have none of the disqualifications for a license as provided by Title 23, Chapter 9, 10 and 13, Idaho Code and any Amendments thereto.

Applicant Signature

On this _____ day of _____ before me, a notary public in and for said state, personally appeared

Signed _____

Residing at _____

Commission Expires _____

(Seal)

COUNTY USE ONLY

By: _____

Title: _____

Receipt #: _____

Date: _____

State #: _____

County #: _____

Disapproved: _____

Issued: _____

Commissioner Signature

Date Signed