

TEMPORARY LICENSE **APPLICATION**

To serve fermented malt beverages and intoxicating liquors

			(Not to exceed 14 day
License Effective	_//	to	_//

We're going outside.
PLEASE PRINT LEGIBLY

	oing outside. NT LEGIBLY		period	d!)
NAME OF AI	PPLICANT:			
	FIRST	MIDDLE INITIAL	LAST	
ADDRESS OF	F APPLICANT:STREET	СІТҮ	STATE	ZIP
DATE OF BII	RTH/ / SSN			
PHONE NUM	IBER ()			
Where Do Yo	u Intend To Use This Licer	nse?		
What Dates D	o You Intend To Use This	License?		
	en refused a license to serve ferme icating liquors?	nted beverages	YES	□ NO
Have you ever had	d such a license revoked?		YES	□ NO
	en convicted of violating any crim en convicted of violating any licer		YES	∐ NO
	g the sale of beverage or intoxication		YES	□ NO
If	you answered "YES" to any of the	above questions, please give a co	omplete explanatio	n.
any of it's agents to obtakind which may at any to comply with it. I here	benalty of perjury, declares the foregoing applic tin information pertaining to me and do hereby time result to me, my heirs, family or associates by agree to comply with all federal, state, and revilege should be granted to me.	release any agency, business, or individual from because of compliance with this authorization	m any and all liability for and request to release inf	damages of whatever formation or any attempt
Date:	Signature of Appl	icant:		
	FOR	OFFICE USE ONLY		
PAID: Cash	Check	COST: \$20.00		
Signature of Ind	ividual issuing Provisional Lice	nse:		