

CHECKLIST OF REQUIRED ITEMS FOR LIQUOR LICENSE APPLICATIONS

- Completed Application
- Completed Personal Information Data Form
- Photo of Owners and Managing Officer
- Photo of Establishment
- Diagram of the Premises (including Basement, Exterior Seating)
- Appointment of Managing Officer Form
- LLC Operating Agreement or Corporate Bylaws
- Certificate of Good Standing from the State of Missouri
- Fictitious Name Registration
- Copy of State License
- Copy of State Criminal Background Check
- Copy of City of North Kansas City Business License
- Copy of Certificate of No Tax Due
- Copy of Menu –Restaurant/Bar License Only
- License Fees – Make Check Payable to: **City of North Kansas City**

NORTH KANSAS CITY LIQUOR LICENSE APPLICATION

TO BE COMPLETED BY OWNER; MEMBERS OF PARTNERSHIP; OFFICERS, DIRECTORS AND STOCKHOLDERS OF CORPORATION

Business Name (LLC, Corporation, Partnership, Sole Owner):

DBA Name: _____

Business Address: _____ North Kansas City, MO 64116

Days & Hours of Operation _____

Business Type:

____ Restaurant/Bar ____ Tavern ____ Package Sales

License(s) Applying For:

____ Original Liquor License ____ Sunday ____ Extended Hours (3am) ____ Legal Description Change
____ Change of Managing Officer ____ Change of Ownership ____ Manufacturer ____ Wholesaler

Type of Liquor License:

____ Retail Sales by Drink ____ Malt Liquor / Light Wine Sales by Drink ____ Retail Sales by Package
____ Malt Liquor Sales by Package ____ Microbrewery ____ Beer by the Drink

Wholesaler: ____ Full ____ 22% or less ____ Beer (5%)

Manufacturer: ____ Full ____ 22% or less ____ Beer (5%)

Other (please describe): _____

Legal Description Includes:

How Many Floors Will Be Licensed: _____ (Including Basement)

____ Exterior Deck ____ Exterior Patio ____ Sidewalk Café ____ Rooftop

Deck Patio Location ____ East ____ West ____ North ____ South

Total Square Footage of Inside Premises: _____ Total Square Footage of Exterior Premises: _____

Property Owner's Name: _____ Mobile Phone: _____

Entertainment:

Type of Entertainment: _____ Live Music _____ DJ _____ Dancing _____ Other: _____

Managing Officer:

Managing Officer's Name: _____

Address: _____

[Must Be a Missouri Resident]

Email: _____ Mobile Phone: _____

Corporation

Name of Corporation: _____

State of Corporation: _____ Date of Incorporation: _____

List all owners of the LLC and stock percentages:

Limited Liability Company

Name of LLC: _____

State of Organization: _____ Date of Organization: _____

List all owners of the LLC and stock percentages:

Partnership

Name of Partnership: _____

State of Partnership: _____ Date of Partnership: _____

List all owners of the Partnership and stock percentages:

Is the proposed location within 300 feet of a school or church? Yes No

Landlord's Name: _____

Contact Information: _____

Property Owner(s): _____

Contact Information: _____

What interest, if any, does your landlord have, directly or indirectly, in the business in which you intend to engage if the license is granted?

Does the former owner of the business have any interest, either directly or indirectly, in the business for which you seek a permit? Yes No N/A If yes, provide details:

Total investment amount to set up the proposed business \$ _____

Source of Funds: _____

List the names of all person(s), firms or corporations that have provided or will provide money to purchase or set up this business and indicate amount

Have you ever been bankrupt or insolvent? Yes No

Will you be the person in active control and management of this business: Yes No Other

If you do not operate the business full time, give complete information on proposed or planned management:

Is there now employed, or do you expect to employ, in the business sought to be licensed hereunder, any person who has been convicted of a crime? Yes No If yes, provide details:

Is this application being made by the corporation as a subterfuge to permit any person other than yourself to obtain a permit from the Director of Liquor Control, in your name for his benefit? Yes No

If applying as a RETAILER, does any distiller, wholesaler, winemaker, brewer, or supplier of coin-operated manual, or mechanical amusement device, or any employees, officers, or agents thereof have any financial interest in the business or will you either directly or indirectly borrow or accept from any such person or persons equipment, money, credit, or property of any kind except ordinary commercial credit for liquor sold? Yes No

If applying as a WHOLESALER does any retailer or supplier of equipment, or coin-operated commercial, manual, or mechanical amusement device, or any employees, officers, or agents thereof have any financial interest in the business or will you either directly or indirectly borrow or accept from such person's equipment, money, credit, or property of any kind except ordinary commercial credit for liquor sold? Yes No

Do you agree to allow the North Kansas City authorized representatives to conduct necessary investigations into the business and into financial and possible criminal records at banks and police agency respectively? Yes No

Will you at all times permit the entry of any officer or investigator who may have legal supervisory authority for the purpose of inspection or search; and will you permit the removal of all things and articles which may be in violation of the Ordinances of North Kansas City, Missouri, and the laws of the State of Missouri; and do you consent to the introduction in evidence of such articles in any proceedings for the violation of any provision of the revised liquor control ordinances of North Kansas City, Missouri, and/or for the suspension or revocation of the permit which this application is made; and do you promise and agree not to violate any of the ordinances of North Kansas City, Missouri or the United States in the conduct of the business for which permit is sought? Yes No

Do you agree to comply with the provisions of Chapter 4 of the Code of Ordinances of North Kansas City, Missouri and will not violate any ordinances of the City and laws of the State of Missouri? Yes No

I, _____, being of lawful age and duly sworn upon my oath, declare that I have read the application and fully understand the contents thereof and the information that I have provided is accurate and complete.

Applicants Signature

Date

OFFICE USE ONLY

License: _____ Approved _____ Denied _____ Other

Comments:

Director

Date

NORTH KANSAS CITY LIQUOR LICENSE PERSONAL DATA

ANY PERSON THAT HAS MORE THAN 10% OWNERSHIP / MUST ALSO SUBMIT A BACKGROUND CHECK

Name: _____ Maiden: _____

Address: _____ City: _____ State: _____

Email: _____ Contact Phone: _____

SSN: _____ DOB: _____ Place of Birth: _____

Spouse's Name: _____ Maiden: _____

Business Name: _____

Address: _____

Do you or any immediate family member have direct or indirect interest in any other active liquor license?

____ Yes ____ No If yes, please provide additional information:

Are you a United States citizen? ____ Yes ____ No If no, Date and Place of Naturalization:

Have you ever been arrested, indicated or convicted for the violation of any federal or state law?

____ Yes ____ No If yes please provide details:

Have you have applied for a liquor license that was denied or revoked? ____ Yes ____ No

If yes please provide details:

What percentage of the license do you have? _____ %

I, _____, being of lawful age and duly sworn upon my oath, declare that I have read the application and fully understand the contents thereof and the information that I have provided is accurate and complete.

Applicants Signature

Date