

CITY OF DEVILS LAKE APPLICATION FOR HOTEL LIQU

TO: The City Commission of the City of Devils Lake, North Dakota.

OR LICENSE					
LICENSE #					
and alcoholic beverages. I understand nly to registered guests. This hotel, and as a basis therefore					
r:					
applicant is a partnership or a partners or officers, directors and					
rporation of authorized capitalization? prporation? Purpos irectors and individuals holding 1% or					
Devils Lake.					
·					

I hereby make application for a Class VIII license to eng that I can provide on-sale or complementary alcoholic b license will be in effect for the period beginning , make the following representations:	everages but must adhere to off-sale on	lly to registered guests. This hotel				
Name of Hotel Liquor License Applicant (Business N	Name):					
Contact Person:	Daytime Phone Number:					
Business Owner/Owners Information:						
1). Name:	2). Name:					
Address:	Address:	Address:				
Social Security Number:	Social Security Number:	Social Security Number:				
Driver's License Number:	Driver's License Number:	Driver's License Number:				
Date of Birth:	Date of Birth:					
3). Name:	4). Name:					
Address:	Address:					
Social Security Number:	Social Security Number:					
Driver's License Number:	Driver's License Number:					
Date of Birth:	Date of Birth:	Date of Birth:				
 I am a citizen of the United States, and a resident of I (Applicant, if an individual, must be a legal resident corporation, the manager of the licensed premises must be legal residents of the U.S.) If incorporated, give date of charter If so, amount paid in capital Give capital stock with amount held by each: 	of U.S. and a resident of the State. If a ust be a resident of the state and the pa Is it a North Dakota corp Is it a subsidiary of any other corpe names and addresses of all officers, directly the state of the State. If a use the state and the pa	poration of authorized capitalization? reporation? Purpose rectors and individuals holding 1% of				
5. Street address of business is:		·				
6. Date applicant acquired title: If lease, state	e name and address of owner:	·				
7. Have you ever been engaged in the sale or distribution. If renewal, give date first began business						
8. Is the diagram or blueprint of the licensed premise pr dispensed current? If this is a new ap be submitted with application.						
9. Have you ever had a license rejected by any municip	ality, state or federal authority?	·				

10. Have you ever been convicted of any violation of a governing the manufacture, sale, distribution, or posses					
11. Have you had a license for the sale of alcoholic bev	verages revoked	for any viola	ation of any state law	or local ordinance?	
12. Ever been convicted of any crime other than that sta	ated in 9/10 eith	er in ND or a	any other state, or und	ler any federal law?	
13. Information on any person who will have charge, r	nanagement, or	control of th	e establishment (mus	t be a resident of the State)	
Name:	Address	s:			
Social Security Number:	Driver's	s License Nu	mber:		
Date of Birth:	_ Daytime	Daytime Phone Number:			
14. Has any person, other than applicant, any right, title the premises for which license is sought? If yes, state r					
15. Have you any interest whatsoever directly or indire wholesale or retail, within or without the state?	ctly, in any othe	r establishm	ent dispensing alcoho	lic beverages, either at	
16. List the occupations which you have followed the p					
17. Give the names and addresses of at least three (3) b					
18. Are you rated by any commercial agency?					
19. Will you be engaged in any other form of business			•	nse applied for?	
20. Are the property taxes of the applicant delinquent?					
21. Do you consent to entry and inspection of the prem officer, sheriff, or any peace officer of the City of Devi unreasonable searches or seizures, and further consent which is held therein in violation of the laws of the stat seized and taken away by such officer, and such alcoho you in any procedure brought pursuant to the laws of the	ls Lake or of the that any alcohol e or in violation blic beverages or	e state, and wice beverages of the Municother proper	vaive all rights, consti- or any other property cipal Code of the City rty so seized may be r	tutional or otherwise, against found upon said premises of Devils Lake may be received in evidence against	
22. Do you promise and agree to abide by each provision amendments thereto?					
The fee for the Hotel Liquor License is <u>\$1,500.00</u> .					
Dated at Devils Lake, North Dakota, on this da	y of	20		licant's Signature)	
STATE OF NORTH DAKOTA					
County of Ramsey				t Applicant Name)	
	e application, the	at he/she read	d each question and st aid application, and th	at each one of said answers i	
Subscribed and sworn to before me on thisday	of	20	RENEWAL RI DATE:	EVIEWED 	
Notary Public for Ramsey County, North Dakota. My commission expires	(SEAL	.)	PC	DLICE CHIEF	
Revised: Aug, 2017			APPROVED:_	DENIED:	