CANYON COUNTY

ALCOHOL **RENEWAL** LICENSE

1.)	NAME OF BUSINESS:
2.)	DOING BUSINESS AS:
3.)	MAILING ADDRESS:
4.)	PHYSICAL ADDRESS OF BUSINESS:
5.)	BUSINESS PHONE: ()
6.)	APPLICANT PHONE: ()

Title of Officer	Name	Officer Address	Date of Birth

Have there been any changes in circumstances relating to the licensee's qualifications or any other requirements to hold a license since the last application?				
Examples: Change in officers, if any office have gotten a felony since last year, change is type of alcohol sold and ect.				
☐ YES☐ NOIf yes, please list all changes in detail (if more space is needed, attach a sheet)				

Type of license

Beer – Select one (1) box and pay that fee:					
Bottled and canned, consumed OFF premises.					
Bottled and canned, consumed ON premises.					
\$100.00 DRAFT, bottled and canned, consumed					
premises.					
	BEER TOTAL \$				
Liquor by the drink - This fee covers wine .					
Select one (1) box and pay that fee					
(Do NOT pay wine fee if you have liquor):					
\$75.00 Notus					
\$125.00 Parma					
\$187.50 All other cities					
	LIQUOR TOTAL\$				
Wine – <u>Do NOT select if Liquor by the drink is che</u>	cked				
Otherwise, select the box and pay that fee:					
\$100.00 Wine					
_					
	WINE TOTAL \$				
	·				
	TOTAL COST \$				

I hereby swear, under the penalty of perjury, that the above information I provided in this application is true and accurate to the best of my knowledge. I further swear that I have verified that the premises for which I propose to obtain this license is in compliance with all state and local laws and regulations concerning health, safety, building and fire codes, and planning and zoning. I further understand and agree that should any changes to the premises, circumstances or requirements to hold this license occur after submitting this application, I will immediately file a written report documenting those changes with Canyon County. Printed name of Applicant Signature of Applicant Date State of _____ County On this _____day of ______in the year 20____, before me_______, a notary in the State of ______,Personally appeared____ known to me (or Proved to me) to be the person or persons whose name is subscribed to within the instrument and acknowledged to me that (he/she) executed the same. In Witness Whereof, I have hereunto set my hand and affixed my official seal the day and year in this certificate above written. Notary Public for Idaho

My Commission Expires:

(SEAL)