



Alcohol Beverage Control
 13600 Aydell Lane * P.O. Box 217, Walker, LA 70785
 Telephone: 225-665-4356

NEW RENEWAL

Business License Application

<p>Class of Permit</p> <p>Class A - Consumption on premises</p> <p><input type="checkbox"/></p> <p>Class B - Package Only</p> <p><input type="checkbox"/></p> <p>Caterer</p> <p><input type="checkbox"/></p> <p style="text-align: center;">LICENSE FEES:</p> <p>Class A Liquor \$500.00 Class A Beer.....\$75.00 Class B Liquor \$500.00 Class B Beer.....\$75.00</p>	<p>Type of Alcoholic Beverage to be Sold</p> <p><input type="checkbox"/> Beer Only</p> <p><input type="checkbox"/> Beer & Liquor</p> <p><input type="checkbox"/> Liquor Only</p>	<p>(Office Use Only)</p> <p>_____ Date of NO I Application</p> <p>_____ Business Application</p> <p>_____ Zoning Conforming Letter</p> <p>_____ Class A/B Information</p> <p>_____ Licensing Acknowledgment</p> <p>_____ Health Department</p> <p>_____ Inspection Reports</p>
--	--	--

<p>1. Trade Name of Business: _____</p> <p>Business Phone Number: _____</p> <p>Email: _____</p>	<p>2. Business Owner (Name of Individual, Partnership, Corporation, LLC)</p>
<p>3. Business Address (Street/Zip Code)</p>	<p>4. Mailing Address (PO Box/Street/City/State/Zip Code)</p>

5. Type of Ownership: **Sole Owner**; **Partnership** (Requires Written Agreement); **Corporation** (Requires Certification); **LLC** (Requires Certification)

6. Is applicant the owner of the premises to be occupied? YES NO

If "Yes", you must provide a copy of the Act of Sale with this application.
If "No", you must provide a copy of the written lease.

<p style="text-align: center;">MANAGER APPOINTED FOR THIS LOCATION</p> <p>MANAGER NAME: _____</p> <p>MANAGER PHONE NUMBER: _____</p> <p>MANAGER EMAIL: _____</p>	<p style="text-align: center;">LESSOR'S CONTACT INFORMATION</p> <p>NAME _____</p> <p>PHONE NUMBER _____</p>
--	--

7. List the legal name, title and percentage of ownership of each person for this business. (Note: A Schedule "A" form must be completed and attached to this application for EACH manager, owner, partner, officer, director, financial backer, and any stockholder owning more than 5 percent of the stock) Attach additional sheet, if necessary.

Full Legal Name	Title (Stockholder/Director/Officer)	% of Ownership

I affirm that I have read each of the questions in this application and the answers which I have given are true and correct to the best of my knowledge. I understand that any false statement or misrepresentation of fact constitutes grounds for denial of this application. By signing this application, the holder of any license issued to the applicant agrees to waive all formalities regarding search and seizure during the duration of the license. Furthermore, the holder of the license agrees to waive the same formalities if the license is revoked or if the holder is ordered by a court of competent Jurisdiction to remove all alcohol, for as long as the holder owns or rents the previously licensed premises.

Signature: _____ Title: _____

Printed Name: _____ Date: _____