



PIKE COUNTY, MISSOURI

APPLICATION FOR COUNTY LIQUOR LICENSE

BUSINESS NAME _____

DBA NAME _____

ADDRESS _____

CITY/STATE/ZIP _____

PHONE NUMBER _____

MAIL TO _____

ADDRESS _____

CITY/STATE/ZIP _____

MANAGER/OWNER _____

ADDRESS _____

CITY/STATE/ZIP _____

PHONE NUMBER _____

STATE LICENSE(S) REC'D (example - Retail Liquor by Drink; Sunday by Drink; 5% By Drink; Original Package; must be the same as on State license, inc. copies, if possible)

It is expressly understood and agreed that any license heretofore granted to me by the County Commission may be revoked by said Commission at any time upon proper showing of any violation by me or my employees of any law of the State of Missouri or of any regulation, ordinance or rule of the aforesaid city concerning said business of selling intoxicating liquors, and upon revocation thereof I shall not be entitled to a refund in whole or in part of the fee paid for this license.

The undersigned deposes and states that the facts set out above are true and hereby makes application for a county license to be granted by the County Commission of Pike County this _____ day of _____, 20__.

(signature of applicant)

The above license is hereby approved on the _____ day of _____, 20__, and the Clerk of the Commission is hereby ordered to issue a License in accordance herewith.

Presiding Commissioner

Associate Commissioner

App Rtn'd _____
State Aprv'd _____
License Sent _____
License#(s) _____

INSTRUCTIONS FOR COMPLETING THE LIQUOR LICENSE APPLICATION:

BUSINESS NAME *Indicate the correct name of the business*

DBA NAME *Indicate the doing-business-as name if applicable*

ADDRESS *Indicate the physical address of the business*

CITY/STATE/ZIP

PHONE NUMBER *Indicate the phone number of the business*

MAIL TO *Indicate how any mail for the business should be addressed*

ADDRESS *Indicate the mailing address for the business*

CITY/STATE/ZIP

PHONE NUMBER *Indicate the phone number of the contact person for the business*

MANAGER/OWNER *Indicate who should be contacted regarding state & county liquor licenses and what position they actually hold (this needs to be the person whose name will be on the State license)*

ADDRESS *Indicate the residence address of the contact person listed above*

CITY/STATE/ZIP

STATE LICENSE(S) REC'D (example - Retail Liquor by Drink; Sunday by Drink; 5% By Drink; Original Package; must be the same as on State license, inc. copies, if possible)

*Indicate what type of license(s) the state issued to you – please be sure that the license type(s) listed for your county license are the same as on your state license and that all types are listed. **We must verify that you have received your state liquor license before a county liquor license will be issued.** Sending copies of your state license with your application will expedite the process. The charge for the license varies based on the type of license you receive. Please feel free to call us before you send in your application to get the appropriate charges. (573-324-2412) or we will need to send a bill after we receive your application which will delay processing until we receive payment.*

The county also requires that pool/billiard tables be licensed. Those licenses are due along with the liquor license. The charge is \$20.00 per table and a \$3.00 processing fee. We request that you make a separate check for this fee.

Fill in the date where indicated, and **BE SURE TO SIGN YOUR APPLICATION**

When the application, along with payment, is received by our office, it must be approved by the County Commission. The Commission meets on Monday and Thursday mornings. **Payment must be received before a license will be issued.** After the Commission approves the application, a license is issued (pending verification of State license approval) and will be mailed to you as soon as possible. If you would like to make arrangements to pick-up your license, please feel free to contact us. County Liquor Licenses expire on June 30th each year.

Make liquor license check payable to:

PIKE COUNTY TREASURER

Make pool table license & fee check payable to:

PIKE COUNTY COLLECTOR

Mail Application and check(s) to:

PIKE COUNTY CLERK
115 W. MAIN STREET
BOWLING GREEN, MO 63334