



Douglas County

SHERIFF

"A Tradition of Service"

Ron Pierini
SHERIFF

LIQUOR/GAMING LICENSE APPLICATION ESTABLISHMENT INFORMATION

TYPE OF APPLICATION: LIQUOR LICENSE _____

FINACIAL INVESTOR _____

TYPE OF LIQUOR LICENSE: (please select one)

- A. ON SALE LIQUOR LICENSE (F/B) \$225.00 quarter _____
- B. ON SALE BEER & WINE (F/B) \$125.00 quarter _____
- C. CABARET (FULL BAR) \$325.00 quarter _____
- D. OFF SALE LIQUOR \$100.00 quarter _____
- E. OFF SALE BEER & WINE \$ 50.00 quarter _____
- F. DISTRIBUTOR \$200.00 quarter _____
- G. MANUFACTURER \$200.00 quarter _____
- H. CATERER \$ 60.00 quarter _____
- I. DINING BEER & WINE S/B \$125.00 quarter _____
- J. DINING FULL ALCOH S/B \$175.00 quarter _____
- K. DINING CABARET (S/B) \$225.00 quarter _____

CLASS A _____
 CLASS B _____
 CLASS C _____
 DISCOTHEQUE _____

GAMING _____
 RESTRICTED _____
 NON-RESTRICTED _____
 PARTICIPANT _____
 SPACE LEASE _____
 COMPANY _____

ZONING APPROVAL _____

PLEASE PRINT

Applicant's Name: _____

Name of Establishment: _____

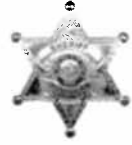
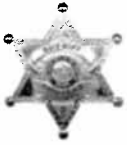
Name of Corporation or Owner of Establishment: _____

Street Address: _____ City _____ State _____ Zip Code _____

Mailing Address: _____ City _____ State _____ Zip Code _____

Telephone Number: _____

***The information contained on this sheet is public record and subject to inspection and copying.**



Douglas County

SHERIFF

"A Tradition of Service"

Ron Pierini
SHERIFF

LIQUOR/GAMING LICENSE APPLICATION SUPPLEMENTAL FORM

The information provided in this supplemental is not available for inspection and copying by the public. The supplemental form will be available to the Liquor Board on a confidential basis pursuant to Douglas County Code section 5.08.050(C).

1) Hours of Operation: _____

2) How many Employees: _____

3) Restaurant? Yes _____ No _____

4) Amount of Investment: _____

5) How Financed: _____

6) Monthly Payments: _____

7) Length of Lease: _____

Conditions on Lease: _____

8) Monthly Payments: _____

9) Partners (Limited, Silent or Otherwise)? Yes _____ No _____

Names: _____

10) Will you have an active part in the operation of the business? Yes _____ No _____

If no explain _____



Douglas County

SHERIFF

"A Tradition of Service"

Ron Pierini
SHERIFF

GAMING LICENSE APPLICATION

TO: EAST FORK FIRE DISTRICT

DATE: _____

APPLICANT: _____

ADDRESS: _____

TELEPHONE: _____

BUSINESS: _____

ADDRESS: _____

TELEPHONE: _____

**SEND FINDINGS TO: DOUGLAS COUNTY SHERIFF'S DEPARTMENT
ATTENTION: PEGGY EDMONSON 782-9933
LICENSING/PERMITS**

FINDINGS: _____

APPROVED: _____ **DENIED:** _____

PERSON COMPLETING THE INSPECTION: _____