

LIQUOR LICENSE REQUIREMENTS

Check List for Information Required for a Harrisonville Liquor License

For All Businesses:

Completed and Notarized application for liquor license

Payment of the appropriate liquor license application fee as shown on Page 1

A current criminal background check with returned approved notification
(this can be done online at mshp.dps.missouri.gov – which is the State of Missouri Highway Patrol website)

Copy of paid **business** personal property receipt

Copy of paid **business** real estate tax receipt, if applicable

Copy of Applicant's valid driver's license OR current picture identification

Copy of Applicant's Missouri voter ID card

Copy of Applicant's **personal** property tax and, if applicable, real estate tax receipt from a County or City within the State of Missouri

Copy of State of Missouri and County of Cass Liquor licenses

Proof that the licensed establishment's State and local sales taxes are paid to date. Proof may be presented In one of two ways:

***New Businesses Only- For Package Retail Sales:* Proof of stock of goods at least totaling one-thousand dollars (\$1,000.00), excluding liquors & fixtures.

- 1) “**NO TAX DUE**” letter from the State of Missouri. This can be obtained from their website: dor.mo.gov OR contacting them by mail with request, which must have your notarized signature in order for it to be accepted.
Mail requests to: Sales Tax Division, Box 840, Jefferson City, MO 65101
OR
- 2) Copy all sales tax returns filed for the previous year along with a copy of the cancelled checks.

For Corporations:

If the licensee is a corporation, then **three (3)** copies of current liquor licenses for **separate locations** in The Corporation's name in the State of Missouri must be provided.

For Resort/Restaurant Bar Licenses:

Proof from sales tax returns must be furnished to ensure sufficient food sales for license. Annual gross receipts shall not have been less than **\$75,000 dollars** per year, with at least **\$50,000 dollars** of such gross receipts are from nonalcoholic sales. (Per RSMo 311.095)



**APPLICATION FOR LICENSE TO SELL ALCOHOLIC BEVERAGES
CITY OF HARRISONVILLE, MISSOURI
300 E. PEARL STREET, P.O. BOX 367
HARRISONVILLE, MO 64701 Phone: 816.380.8900 Fax: 816.380.8910**

Date _____

Updated 10/14/15

TO THE SUPERVISORS OF LIQUOR CONTROL OF THE CITY OF HARRISONVILLE, MISSOURI, the undersigned hereby makes application for a license to sell: (Check One Category and One Sunday Sales if desired)

	General Licenses	(CODES)	Fee
	3.2% Beer Original Package (Includes Sunday)	LQG01	\$22.50
	3.2% Beer by the Drink (Includes Sunday)	LQG02	\$37.50
	5% Original Package (Includes Sunday)	LQG03	\$75.00
	5% by the Drink (includes Sunday)	LQG04	\$75.00
	5% & Light Wines by the Drink or Original Package (Monday-Saturday)	LQG05	\$75.00
	Retail Liquor Original Package (Monday-Saturday)	LQG06	\$150.00
	Retail Liquor by the Drink – Resort / Restaurant Bar	LQG07	\$450.00
	Retail Liquor by the Drink or Original Package Tax Exempt (proof required)	LQG08	\$450.00
	Sunday Sales (Additional Fees)		
	Retail Liquor by the Drink or Original Sales (Includes all categories of by the Drink)	LQS01	\$300.00
	Retail Liquor Tax Exempt Organization Restaurant/Bar	LQS02	\$300.00
	5% & Light Wines By the Drink or Original Package	LQS03	\$300.00
	Special Licenses/Permits		
	Tasting Permit	LQT	\$37.50
	Catering License (Must be licensed for Retail by the Drink) fee is per day up to 5 days	LQC5	\$15.00
	Careering License (Must be licensed for Retail by the Drink) 50 events	LQC50	\$750.00
	Picnic License (Not For Profit—For exact number of days of event not to exceed 7 days	LQP	\$37.50

Said liquors to be sold at and in the following described premises only, to-wit:

- Name of Business (dba) _____
 Street Address _____
 City _____ State _____ Zip _____
 Telephone # () _____ Fax # () _____ E-mail _____
- Mailing Address (if different than above) _____
 Address _____
 City _____ State _____ Zip _____
 Telephone # () _____ Fax # () _____
- Applicant (Managing Officer) _____ Date of Birth _____
- Home Address of Applicant
 Street Address _____
 City _____ State _____ Zip _____
 Home Telephone # () _____ Cell # () _____ E-mail _____
- How long has Applicant lived at this address? _____
- Social Security No. of Applicant _____

7. Place of Birth of Applicant (City and State) _____
8. Is Applicant a U.S. citizen? _____ If naturalized, give date and place of naturalization _____
9. Has Applicant ever been convicted of a misdemeanor or felony? _____ If yes, explain _____
10. Provide paid receipts for personal property taxes and real estate taxes, if applicable for Applicant, as well as real estate taxes on the business.
11. Name of **Owner** of Business (if different from applicant) or (if corporation) Name and title of Company Officer responsible for above business:
 Name _____ Title _____
12. **Owner** Home-Street Address _____
 City _____ State _____ Zip _____
 Home Telephone # () _____ Cell # () _____ E-mail _____
13. **Owner** Mailing Address (if different than above) _____
 Street Address _____
 City _____ State _____ Zip _____
 Telephone # () _____ Fax # () _____
14. How long has **Owner** lived at this residence? _____
15. **Owner** Date of Birth _____ **Owner** Place of Birth (City and State) _____
16. Is **Owner** a U.S. citizen? _____ If naturalized, give date and place of naturalization _____

The following statement is acknowledged by your signing, dating, and having this document notarized: **I do not and will not knowingly employ a person who is an unauthorized alien in connection with the business for which the permit or license has been obtained.**

It is understood and agreed that the City license herein applied for shall not be in full force and effect unless the licensee has a current license for the premises above described from the County of Cass and the State of Missouri.

The applicant herein agrees that when and if said license be issued he/she will obey and abide by all lawful ordinances, regulations and rules adopted by said City in the conduct of said business. The applicant represents that he/she is in all respects qualified in law to receive such license. It is understood and agreed that the license when and if issued shall be subject to revocation for cause by the Supervisor of Liquor Control and when and if lawfully revoked for cause, no part of the fee paid hereunder shall be returned to the applicant.

_____(Name of Applicant), being duly sworn, deposes and states that the facts set out in the above application are true.

Subscribed and sworn to me this _____ day of _____ 20____

Signature of Applicant

Notary Public

My Commission Expires _____ .