

APPLICATION TASTING PERMIT INTOXICATING LIQUOR

Name and address of applicant _____

Date of Birth _____ Social Security No. _____

Are you a native born or naturalized citizen of the United States of America _____

State whether ever convicted of any violation of any ordinance of the City of Marshfield, Missouri, or of any other municipality. If answer is "Yes", state the date, place, court, type of offense and the penalty assessed: _____

State whether you have ever been convicted of any criminal offense against the laws of the State of Missouri, or any other state. If the answer is "Yes", state the date, place, court, type of offense and the penalty assessed: _____

Have you ever before been a licensee for a tasting permit? If you have, state when and where: _____

State the exact *location* and *name of the business* where the applicant expects to conduct the business under this license: _____

State the type of business which the applicant expects to conduct in conjunction with the tasting permit: _____

Missouri Sales Tax No. _____ Federal ID No. _____

Include with application:

1. Copy of Certificate of Insurance.
2. Copy of Missouri Sales Tax Certificate
3. Copy of driver's license.
4. Copy of voter registration card.
5. A list of persons, along with their social security numbers, who have a financial interest in the business.

The above 5 items are currently on file with the original application.

