



CITY OF STAR
P.O. Box 130
Star, Idaho 83669
P: 208-286-7247 F: 208-286-7569

APPLICATION FOR BEER, WINE, LIQUOR LICENSE

Business Name: _____

Physical address of license location: _____

City: _____ State: _____ Zip: _____

Applicant Name: Include partnership or association members,
Board members or stockholders:

Mailing Address: _____

Applicant Telephone: _____ Fax: _____

Age of applicant(s): _____ Citizenship: _____

Applicant(s), partners or association members' length of residence in the State of Idaho:

List any convictions of any laws of the State of Idaho, or the United States, or licensing City within three (3) years immediately preceding the date of filing the application, regulating governing or prohibiting the sale, manufacture, transportation or possession of alcoholic beverages or intoxicating liquors. Within said time has the applicant(s), partners or members suffered the forfeiture of a bond for failure to appear to answer to charges of any such violation?

List any convictions of any felony, or withheld judgment granted following adjudication of guilty of a felony, or fines paid or sentence completed therefore, within five (5) years from the date of this application: _____

Has the applicant(s), partners, or members had an alcoholic beverage license or liquor license revoked within the last three (3) years?

Yes _____ No _____ Date Revoked: _____

All applicants are required to submit the following:

Applicant (√)	Description	Staff (√)
	Completed and signed Liquor License Application	
	Payment in Full	
	Copy of any lease agreement if premises to be used are not owned by the applicant(s), partners, or members.	
	Articles of Incorporation and Bylaws.	
	Copy of State of Idaho Alcohol Beverage License.	
	Copy of Ada County Alcohol Beverage License.	
	Copy of approval letter from the Star Fire Department.	
	Proof of Insurance.	

LICENSE TYPE:

FEES (PER YEAR):

FEE:

Beer consumed on premises	_____	\$200.00	_____
Beer consumed off premises	_____	50.00	_____
Wine consumed on premises	_____	200.00	_____
Wine consumed off premises	_____	50.00	_____
Liquor	_____	225.00	_____
		Total Fee Due	_____

Signature of Applicant

Date

State of Idaho
County of Ada

_____ being first duly sworn, deposes and says that _____ is the owner of the business making the above and foregoing application, and makes the statements therein contained for the purpose of securing a license to sell _____ within the corporate limits of the City of Star, and that (he/she/they) _____ read the above and foregoing application, knows the contents and the facts therein stated are true. _____ read and is familiar with the City of Star ordinances pertaining to this application.

Signature of Applicant

Date

SUBSCRIBED AND SWORN BEFORE ME this _____ day of _____, 20_____.

NOTARY PUBLIC in and for the State of Idaho

Residing: _____

Expiration date: _____

Date Application Received: _____	Date License Issued: _____
Fee Paid: _____	Star License No: _____
Application Complete: _____	