

**St. Louis County Department of Revenue – Division of Licenses**

41 S. Central Avenue, Clayton, MO 63105 – Ph: 314/615-4217, Fax: 314/615-5125 [Licensing@stlouisco.com](mailto:Licensing@stlouisco.com)

**Application for Caterer Liquor License**

Name of Corporation/Owner \_\_\_\_\_

Managing Officer (if applicable) \_\_\_\_\_

DBA (if applicable) \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Contact Name & Phone Number \_\_\_\_\_

Date(s) of Event \_\_\_\_\_

State of MO Liquor Type (e.g. Retail Liquor-By-Drink, Picnic)	State Liquor Number

Proposed legal description of the area where liquor is consumed, served or stored. **EXAMPLE: First floor of a single-story building and outdoor patio.** \_\_\_\_\_

**Applicant: Please date and sign below. Corporations must provide the managing officer’s name and signature**

Date \_\_\_\_\_

\_\_\_\_\_  
**Printed Name** of Applicant (Last, First, Middle)

\_\_\_\_\_  
**Signature** of Applicant

**Please make your check in the amount of \$11.00 payable to ‘St. Louis County Department of Revenue’ and mail to:**

St. Louis County Department of Revenue  
Licensing Division  
41 S. Central Ave.  
Clayton, MO 63105