

**St. Louis County Department of Revenue – Division of Licenses**  
41 S. Central Avenue, Clayton, MO 63105 - Phone 314/615-4217, Fax 314/615-5125

**Application for LIQUOR License for Partnership**  
**as defined by Chapter 801, Saint Louis County Revised Ordinances**

**Please indicate the reason(s) for this application:**

- |  |  |
|--|--|
| <input type="checkbox"/> New Liquor License              | <input type="checkbox"/> Change of Address                 |
| <input type="checkbox"/> Change of Ownership             | <input type="checkbox"/> Change of Corporation Name or DBA |
| <input type="checkbox"/> Change of Managing Officer      | <input type="checkbox"/> Change of Next of Kin             |
| <input type="checkbox"/> Temporary Expansion of Premises |  |

**Type of license and associated fee(s)** \_\_\_\_\_

**If applying for a Sunday license: Do you understand the requirements per classification selected?** \_\_\_ Yes \_\_\_ No

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

**Patio:** \_\_\_ No \_\_\_ Yes - **Number of patio seats:** \_\_\_\_\_ **Proposed patio location:** \_\_\_ Private Property \_\_\_ Sidewalk

**Total fees attached: \$** \_\_\_\_\_ Application fees are non-refundable, and a service fee of \$15.00 will be attached for all dishonored checks.

**All Applicants must complete the section below**

1. \_\_\_\_\_  
**Name of Partner (use separate sheet for additional partners):** Last, First, Middle
2. \_\_\_\_\_  
**Name of Corporation/Partnership/LLC** (exactly as it appears on the Articles of Incorporation or Organization)
3. \_\_\_\_\_  
**Name of Business** (exactly as it appears on the outside of the premises)
4. \_\_\_\_\_  
**Street Address of Business** (no PO Box Number)
5. \_\_\_\_\_  
**Mailing Address (if different)**
6. \_\_\_\_\_  
**Business Phone (with area code)** \_\_\_\_\_ **Contact Phone (with area code)** \_\_\_\_\_
7. **Contact Email** \_\_\_\_\_

8. \_\_\_\_\_  
Residence Address of Partner

9. How long have you resided in Missouri? \_\_\_\_\_ If less than 10 years, list prior addresses:  
\_\_\_\_\_  
\_\_\_\_\_

10. Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ 11. Place of Birth \_\_\_\_\_

12. Social Security Number \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ 13. Sex and Race \_\_\_\_\_

14. Are all partners native born citizens of the United States? \_\_\_\_\_ Naturalized Citizens? \_\_\_\_\_

15. If any partner is a naturalized citizen, provide date of admission and name of court:  
\_\_\_\_\_

16. Is each partner a tax paying resident of Missouri? \_\_\_\_\_ No \_\_\_\_\_ Yes

17. Is each partner a legal voter in Missouri? \_\_\_\_\_ No \_\_\_\_\_ Yes:

\_\_\_\_\_  
Township and Precinct

18. If a license is granted, does the corporation agree that it will first obtain the approval of the St. Louis County Director of Revenue before naming any other person as managing officer during the term for which the license is granted? \_\_\_\_\_ Yes \_\_\_\_\_ No

19. Is the corporation, the managing officer, director, any shareholder or person with an interest in a shareholder, or any member of their household or immediate family interested directly or indirectly in any other liquor license issued by St. Louis County, State of Missouri or any other jurisdiction which is now in force? If so, provide details below:  
\_\_\_\_\_  
\_\_\_\_\_

20. Has the corporation, the managing officer, director, any shareholder or person with an interest in a shareholder or any member of their household or immediate family at any time within the past five years held a liquor license from St. Louis County or the State of Missouri? If so, list the name of the business and the address:  
\_\_\_\_\_  
\_\_\_\_\_

21. Has the corporation, the managing officer, director, any shareholder or person with an interest in a shareholder or any member of their household or immediate family ever made application for a liquor license from St. Louis County or the State of Missouri or by the licensing authority of any state or by any city which was denied? If so, give name of applicant, authority and approximate date of denial and details regarding same.  
\_\_\_\_\_  
\_\_\_\_\_

22. Has the corporation, the managing officer, director, any shareholder or person with an interest in a shareholder or any member of their household or immediate family ever had a liquor license issued by St. Louis County or the State of Missouri or by the licensing authority of any other state or city suspended or revoked? If so, provide details below:

---

---

23. Has the managing officer, shareholder, director, or officer of the corporation ever been employed by a person, partnership, or corporation or entity that had a liquor license suspended or revoked by St. Louis County or the State of Missouri? If so, provide details below:

---

---

24. Is there now employed, or will the corporation employ, in the business sought to be licensed any person who has, at any time held an interest in a liquor license from St. Louis County or the State of Missouri or licensing authority of any other state revoked, suspended or denied? If so, provide details below:

---

---

25. Has the managing officer, or any director, shareholder or officer of the corporation or any person with a direct or indirect financial interest in the corporation have pending criminal charges for the violation of any federal law or law of the State of Missouri, or any other state or presently under a suspended imposition of sentence for the violation of any federal criminal law? If so, provide details below:

---

---

26. Has the managing officer, director, shareholder, or officer of the corporation ever been convicted of any crime in any crime in the Missouri court or in any court in any other state or county, or in any Federal court? If so, provide details below:

---

---

27. Has the managing officer, director, shareholder or officer of the corporation ever been convicted of the violation of any ordinance of St. Louis County or of any city or state relating to intoxicating liquor, non-intoxicating beer, gambling, immorality, fighting or peace disturbance or narcotics? If so, provide details below:

---

---

28. Has the corporation, managing officer, shareholder, director, herein named, or any member of their household or immediate family, ever been convicted of any Federal law or law of any state concerning intoxicating liquor or non-intoxicating beer? If so, state details as to each conviction, give name of person convicted, date, nature of offense, court where sentence was entered, and sentence or fine imposed:

---

---

29. Is there now employed, or will you employ, in the business sought to be licensed hereunder any person who has been convicted of any crime? If yes, provide details below:

---

---

30. Do you own, rent or lease the premises for which you seek a license? \_\_\_\_\_

31. Landlord's name, address and amount of rent paid if applicable:

---

---

32. What interest, if any, does your landlord have, directly or indirectly, in the business you intend to engage in if the license is granted? \_\_\_\_\_

33. If you purchased the business within the past six months, provide name of the former owner, date and amount of purchase: \_\_\_\_\_  
\_\_\_\_\_

34. Did you pay the former owner the total purchase price in cash? If not, state payment details: \_\_\_\_\_  
\_\_\_\_\_

35. Does the former owner of the business have any interest, either directly or indirectly, in the business for which you seek a license? \_\_\_\_\_ No \_\_\_\_\_ Yes: \_\_\_\_\_

36. State the names of any person, firm, or corporation holding any mortgage or any encumbrances of any kind against the business for which you seek a license. If none, write N/A  
\_\_\_\_\_  
\_\_\_\_\_

37. Amount of mortgage or encumbrance and terms of payment: \_\_\_\_\_  
\_\_\_\_\_

38. State names of any person, firm, or corporation, distiller, wholesaler, winemaker, or brewer, or any employee, officer or agent that has advanced, or that will loan any money, directly or indirectly, give away, or furnish equipment, credit of property of any kind to the corporation, to you to purchase or operate the business for which the corporation seeks a license. If none, write N/A  
\_\_\_\_\_  
\_\_\_\_\_

39. State the name and residence of each person, firm, or corporation other than the corporation and its shareholders, interested or to become interested, directly or indirectly, other than hereinabove set out, in the business for which you seek a license and the nature of such interest.  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

40. What is the distance in feet measured in a straight line from the nearest point of the above described premises to the nearest point of the premises of the nearest school/day care, church, or building regularly used as a place of religious worship?

Distance to nearest school: \_\_\_\_\_ft.      Distance to nearest church: \_\_\_\_\_ft

Distance to nearest public park: \_\_\_\_\_ft.      Distance to nearest public playground: \_\_\_\_\_ft

**NOTE:** No license shall be issued to any applicant who proposes to operate within a distance of **300** feet of any church, synagogue, school/day care building or any public park or playground (801.190).

41. Date and Place of Incorporation \_\_\_\_\_

Location of Corporation's Principal Office \_\_\_\_\_

**42. List below names and residences of all officers of the corporation and the office (title) held by each. Attach additional sheets if needed.**

Name	Residence	Date of Birth	SSN	Title	Race

**43. State below the Directors of the Corporation, if different from above.**

Name	Residence	Date of Birth	SSN	Title	Race

**44. State below all shareholders, number of shares owned, and state percent of stock shares for each shareholder of 10% or more.**

Name	Residence	Date of Birth	SSN	Race	# of shares	% of shares

**45. Is the application being made by you as a subterfuge to permit any person other than yourself to secure a license from St. Louis County in your name for their benefit?**

\_\_\_\_\_ No \_\_\_\_\_ Yes: \_\_\_\_\_

**IMPORTANT**

You are required to report any change of fact contained within this application within 10 days.

The corporation understands that false answers may be grounds for denial of license. I agree that if any statements or answers made herein are untrue and the license herein applied for is granted, such license may be revoked or suspended by the Director of Revenue, and I further understand and agree that if I, or any of my employees, shall violate the provisions of any laws of the State of Missouri or St. Louis County, or knowingly allow any other person to do so upon the licensed premises, the Director of Revenue may suspend or revoke the license granted hereunder.

The corporation acknowledges that any license granted by the Director of Revenue will be subject to the current provisions of Chapter 801 SLCRO, and the Rules and regulations of the Director of Revenue, and failure to conform thereto will subject my license to suspension or revocation by the Director of Revenue. And further, I agree to allow inspections made in accordance with the Rules and regulations of the Director of Revenue and authorize the Director of Revenue or his duly appointed agents to examine and secure copies of any business records or documents established in connection with this business including, but not limited to, those on file with my bookkeeper.

The corporation authorizes the Director of Revenue or his duly appointed agents to examine and secure copies of financial records consisting of signature cards, checking and savings accounts, notes and loan documents, deposit and withdrawal records, and escrow documents of my financial institutions(s) or any financial record established in connection with the business.

The corporation authorizes the Director of Revenue or his duly appointed agents to conduct a criminal record check of all the corporation's officers and directors, and stockholders owning ten percent or more of the stock of such corporation

**MUST BE SIGNED IN FRONT OF A NOTARY PUBLIC**

STATE OF MISSOURI

COUNTY OF \_\_\_\_\_ }

I, \_\_\_\_\_, of lawful age, being first duly sworn upon my oath, depose and say that I have read this application and fully understand same and that I know the contents thereof and the answers and statements contained therein and the same are true.

\_\_\_\_\_  
**Printed Name of Managing Officer**

\_\_\_\_\_  
**Signature of Managing Officer**

Subscribed and sworn before me on the \_\_\_\_\_ day of \_\_\_\_\_

My commission expires \_\_\_\_\_

\_\_\_\_\_  
**Notary Public**