

CITY OF WILLISTON
PO Box 1306, Williston, ND 58802

APPLICATION FOR CITY ALCOHOLIC BEVERAGE LICENSE

New Application Transfer of License

To the Board of City Commissioners of the City of Williston, North Dakota:

The undersigned hereby makes application to engage in the retail sale of alcoholic beverages on the premises hereinafter described, for the period beginning (date) _____ and ending December 31st of that same year.

TYPE OF LICENSE REQUESTED:

- | | | |
|---|-----|--|
| 1. GENERAL ON-SALE BEER | () | \$300 PER YEAR |
| 2. GENERAL ON-SALE LIQUOR | () | \$2,000 PER YEAR |
| 3. GENERAL OFF-SALE BEER | () | \$200 PER YEAR |
| 4. GENERAL OFF-SALE LIQUOR | () | \$2,000 PER YEAR |
| 5. CLUB OR LODGE ON-SALE BEER | () | \$300 PER YEAR |
| 6. CLUB OR LODGE ON-SALE LIQUOR | () | \$2,000 PER YEAR |
| 7. SPECIALTY RESTAURANT ON-SALE BEER (tap beer) | () | \$300 PER YEAR |
| 8. SPECIALTY RESTAURANT ON-SALE BEER (canned or bottled beer) | () | \$300 PER YEAR |
| 9. HOTEL OR MOTEL ON-SALE BEER | () | \$300 PER YEAR |
| 10. HOTEL OR MOTEL ON-SALE LIQUOR | () | \$2,000 PER YEAR |
| 11. SPECIALTY AIRPORT ON-SALE BEER | () | \$300 PER YEAR |
| 12. SPECIALTY AIRPORT ON-SALE LIQUOR | () | \$2,000 PER YEAR |
| 13. SPECIALTY SUPPER CLUB ON-SALE BEER | () | \$300 PER YEAR |
| 14. SPECIALTY SUPPER CLUB ON-SALE LIQUOR | () | \$2,000 PER YEAR |
| 15. SPECIALTY RECREATIONAL ON-SALE BEER | () | \$300 PER YEAR |
| 16. SPECIALTY RECREATIONAL ON-SALE LIQUOR | () | \$2,000 PER YEAR |
| 17. GOLF COURSE OFF-SALE BEER | () | \$300 PER YEAR |
| 18. BEER AND WINE ON-SALE | () | \$5,000 FIRST YEAR
(\$1,000 ANNUAL RENEWAL) |
| 19. RESTAURANT ON-SALE BEER AND LIQUOR* | () | \$2,300 PER YEAR |
- *Requires one time issuing fee of \$50,000

As a basis for such license, the applicant makes the following representations:

- Name of applicant (individual, corporation or LLC as applicable) _____
- Applicant contact name _____ phone _____
- Contact Email address: _____
- Name of business to be licensed _____
- Address of premises to be licensed _____
- Mailing address of premises to be licensed _____

7. Property ID #: _____
8. Legal description of premises for which license is desired: _____ floor of building located on Lot _____
in Block _____ of _____ Addition to the City of Williston, North
Dakota.
9. Are there any delinquent taxes or special assessments against the premises? () Yes () No
If yes, please describe: _____.
10. Do you own the business premises sought to be licensed? _____ If not, state the name and address of the owner

11. To be completed if the applicant is a corporation:

Give date of charter: _____ Is it a North Dakota corporation of authorized capitalization? _____ Amount
of paid in capital _____ Is it a subsidiary of any other corporation? _____ If so, give name and address
_____ Pu
rpose for which incorporated: _____
Give names and addresses of all officers, directors and individuals holding 1% or more of capital stock with amount held by
each: _____

12. To be completed by the license applicant, if an individual or LLC:

Name _____

Other names you have used _____ Age _____ years.

Are you a citizen of the United States? _____ If naturalized, give date and place of naturalization _____
_____ How long have you been a resident of the State of North Dakota? _____

Where have you resided for a period of one year last preceding the date of this application? _____

Have you, for the past thirty (30) days, and are you now a legal and bona fide resident of Williams County, ND? _____

Residence Address _____

Mailing Address _____

List the occupations which you have followed during the past ten years

To be completed by all Applicants:

13. Give names and addresses of all partners, silent or otherwise, interested in any manner in said business, or who will have
charge, management, or control of the establishment for which the license is requested _____

14. Have you ever engaged in the sale or transportation of alcoholic beverages prior to this application? _____ If so,
give dates and types of businesses and addresses _____

15. If this application is for a license to be transferred from another license holder, do you have a signed transfer agreement?
_____. *(Please attach a copy of the agreement to this application)*
16. Have you ever had a license rejected by any municipality, state or federal authority? If so, give details _____

17. Have you ever been convicted of any violation of any laws of the United States, or of the State of North Dakota, or local ordinance governing the manufacture, sale or possession of intoxicating liquor? _____ If so, give dates and details _____

18. Have you ever had a license for the sale of intoxicating liquor revoked for any violation of any state law or local ordinance? _____ If so, give date and details _____
19. Have you ever been indicted or convicted of any crime other than as stated above, either in North Dakota or elsewhere? _____ If so, give date and details _____
20. Have you any agreement or understanding or intention to have any agreement or understanding with any person, partnership or corporation to obtain for any other, or transfer to any other person this license, or to obtain it for any other than the specific use of the applicant? _____ If so, give names, addresses and details of any such agreement, understanding or intention _____
21. Have you any interest whatsoever, directly or indirectly, in any other liquor establishment within or without the state of North Dakota? _____ If so, give names and addresses of establishments _____

22. Give names and addresses of at least three business references, including one bank, and state briefly the extent of business relations with each _____

23. Are you rated by any commercial agency? _____ If so, give names and details of rating _____

24. Will you be engaged in any other form of business other than the sale of alcoholic beverages under the license applied for? _____ If so, give type of business and name of employer and address _____

25. **If this application is for a golf course** on-sale beer license held by a golf association, name the person responsible for compliance with applicable city, state and federal laws: _____
26. **If your application is for a "specialty"** beer and/or liquor license, please state facts about your business which qualify you for such specialty license or licenses (type of specialty, plans, and other factual information you think will be helpful for the City Commission in acting upon your license application _____
27. **If your application is for a "club or lodge"** state date organized: _____ How many members? _____
State the purpose for which organized: _____
State the purpose for which profits derived from this license are to be applied:

****ALL APPLICANTS** please attach:

- ND State Sales and Use Tax Permit
- CURRENT COMMERCIAL LIABILITY INSURANCE FOR THE BUSINESS
- CURRENT COMMERCIAL LIQUOR LIABILITY INSURANCE
- FLOOR PLAN OF PREMISES depicting square footage dimensions and clearly indicating: where alcohol is to be stored, where alcohol is to be sold and, (for on-site consumption licenses), where alcohol is to be consumed

****TRANSFER APPLICANTS** please attach:

- TRANSFER and/or SALE AGREEMENT of alcoholic beverage license, signed and notarized by all parties

Corporate applicants go to page 5, Section 1 and complete signature paragraph.

Individual or LLC applicants go to page 5, Section 2 and complete signature paragraph.

All Managers of the business premises go to page 6, complete information paragraph and sign the Release.

The City of Williston mandates that all servers of alcohol shall receive alcohol server training within ninety (90) days of employment. All liquor establishment managers must keep a copy of each employee's card on file at the establishment along with date of hire. Contact the Alcohol Beverage Training Officer at the Williston Police Department for further information on classes that are offered 701 577-1212.

(SIGNATURE SECTION 1 -- FOR CORPORATE APPLICANT)

The applicant herein expressly consents that any law enforcement officer of the City of Williston or the State of North Dakota may enter areas of public access of the licensed premises described in this application. Do you agree to this provision? _____

Do you promise and agree to abide by the provisions of the North Dakota State Law dealing with alcoholic beverages, and each provision of Ordinance No. 550 passed by the governing board of the City of Williston on the 28th day of August, 1979, and any future amendments of said law or Ordinance? _____

Dated at Williston, North Dakota, on this _____ day of _____, 20_____

Printed Name of Corporate President

By:

Signature of President

ATTESTED BY:

Signature of Secretary

_____ and _____ being first duly sworn, depose and say that they are officers of the corporate applicant described herein, and who executed the foregoing and above application on behalf of said corporation, that they have read each question and statement therein contained and know the contents thereof, and that they have made the answers set forth in said application, and that each one of said answers is true to the best of their own knowledge.

Subscribed and sworn to before me on this _____ day of _____ 20_____

NOTARY PUBLIC

My Commission Expires: _____

(SIGNATURE SECTION 2 -- FOR INDIVIDUAL or LLC APPLICANT)

The applicant herein expressly consents that any law enforcement officer of the City of Williston or the State of North Dakota may enter areas of public access of the licensed premises described in this application. Do you agree to this provision? _____

Dated at Williston, North Dakota, on this _____ day of _____, 20_____

Applicant Name – Printed

Applicant Signature

_____, being first duly sworn, deposes and says that he/she is the applicant who is described in and who executed the foregoing and above application, that he/she has read each question and statement therein contained and knows the contents thereof, and that he/she has made the answers set forth in said application, and that each one of said answers is true of his/her own knowledge.

Subscribed and sworn to before me on this _____ day of _____, 20_____.

NOTARY PUBLIC

My Commission Expires: _____

To be completed by person/s deemed "Manager" of the premises to be licensed (if different from #12 above. If you completed #12 above, you do not need to fill in the answers below, but you must answer the question in the Release and sign):

Name _____

Other names you have used _____

Age _____ years. Date of Birth _____ Are you a citizen of the United States? _____

If naturalized, give date and place of naturalization _____

How long have you been a resident of the State of North Dakota? _____ Where have you resided for a period of one year last preceding the date of this application? _____

Have you, for the past thirty (30) days, and are you now a legal and bona fide resident of Williams County, ND? _____

Residence Address _____

Mailing Address _____

List the occupations which you have followed during the past ten years _____

RELEASE

To all past and present employers, military and law enforcement agencies, I hereby authorize the City of Williston, North Dakota, a municipal corporation, to investigate my past and present work, character, military and police records to ascertain and review any and all information which may concern me for purposes of determining my ability to comply with local liquor license ordinances. The release of any and all information is authorized whether the same is of record or not, and I do hereby release all persons, firms, agencies, companies, groups or installations, whosoever, from any damages because of or resulting from furnishing such information to the City of Williston, and I release the City of Williston and its employees from any damage or claim which may result from use or release of such information.

Do you promise and agree to abide by the provisions of the North Dakota State Law dealing with alcoholic beverages, and each provision of Ordinance No. 550 passed by the governing board of the City of Williston on the 28th day of August, 1979, and any future amendments of said law or Ordinance? _____

The undersigned agrees that s/he is the Manager for the applicant and agrees to indemnify the City and hold it harmless from any liability arising as a result of this license and any subsequent permit applied for under Chapter 3 – Alcoholic Beverages, of the Williston Code of Ordinances.

Date: _____

Manager Name - printed

Manager signature

Subscribed and sworn to me before this _____ day of _____, 20 _____.

Notary Public signature

My Commission expires: _____