

TOWN OF SPRINGDALE

# LIQUOR LICENSE APPLICATION COVER SHEET

*Please submit this sheet with your license application materials.*

Tavern/Organization Name: \_\_\_\_\_ Date: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Email: \_\_\_\_\_

Licenses applied for: \_\_\_\_\_

*Indicate all applicable license types (found on the AB-200 form) and whether new or renewal.*

Operators (please print clearly):

Total # **new** (list each below): \_\_\_\_\_

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_
7. \_\_\_\_\_
8. \_\_\_\_\_
9. \_\_\_\_\_
10. \_\_\_\_\_
11. \_\_\_\_\_
12. \_\_\_\_\_
13. \_\_\_\_\_
14. \_\_\_\_\_
15. \_\_\_\_\_

Total # **renewing** (list each below): \_\_\_\_\_

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_
4. \_\_\_\_\_
5. \_\_\_\_\_
6. \_\_\_\_\_
7. \_\_\_\_\_
8. \_\_\_\_\_
9. \_\_\_\_\_
10. \_\_\_\_\_
11. \_\_\_\_\_
12. \_\_\_\_\_
13. \_\_\_\_\_
14. \_\_\_\_\_
15. \_\_\_\_\_

**\*\*\*REMEMBER TO FILL IN YOUR SELLER'S PERMIT APPLICATION # AND FEIN, ON THE AB-200 FORM.\*\*\***

## FEES

*Make check payable to the Town of Springdale. Payment and forms must be received **3 weeks** prior to the TB meeting.*

License		#	Total
Retail License (new/renewal)	\$500.00		
Operator's License (ea.)	\$20.00		
Temp. (Picnic) License (ea.)	\$10.00		
Temp. Operator's License (ea.)	\$20.00		
Building Inspection (tavern only)	\$62.50		
			\$