

**CITY OF MOSCOW
BEER AND/OR WINE LICENSE APPLICATION
NEW LICENSE**



LICENSE EXPIRES EVERY JANUARY 31ST

Date: _____

LICENSE TYPE AND FEES

State License Number _____ Premise Number _____

Type of License	Amount	Total
<input type="checkbox"/> Beer – retail sale for off-premise consumption	\$50.00	
<input type="checkbox"/> Beer – by the drink for on premise consumption	\$200.00	
<input type="checkbox"/> Wine – retail sale for off premise consumption <i>(must also have retail beer license) *</i>	\$150.00	
<input type="checkbox"/> Wine – by the drink for on premise consumption <i>(must also have retail beer license) *</i>	\$150.00	
<input type="checkbox"/> Wine – by the drink AND retail sale on/off premise <i>(must also have retail beer license) *</i>	\$200.00	
<input type="checkbox"/> Inspection fee <i>(may be waived if a building permit is required for construction/remodel)</i>	\$125.00	
<input type="checkbox"/> Restaurant Certification	\$0.00	
TOTAL		

** Licensed wineries are not required to possess a retail beer license as a prerequisite to a retail wine license.*

LICENSING DEPARTMENT / AGENT N/A

Contact person _____ Phone # _____

Email _____

Street address _____

Mailing address _____

BUSINESS INFORMATION

Business name (DBA) _____ Phone # _____

Business street address _____

Business mailing address _____

Type of business _____

Business dates of operation _____ Hours of operation _____

Business contact person _____ Phone # _____

Business email _____

APPLICANT INFORMATION (owner, president, chair, etc.)

Applicant is a Sole proprietor Partnership Corporation

If a corporation, partnership or association, also provide information on Attachment A.

Applicant Name *(print - last, first, middle)* _____

List any and all previous names _____

Title _____ Date of birth _____

Mailing Address _____

Idaho resident Yes No Length of Idaho residency _____

Contact email _____ Phone _____

Idaho State Tax Commission Seller's Permit Number (SEIN) _____

Idaho Tax ID Number (FEIN) _____

Yes No Has Applicant or anyone listed on **Attachment A** ever had an alcohol license suspended, denied or revoked? (if yes, attach explanation);

Yes No Has Applicant or anyone listed on **Attachment A** ever been convicted of any felony, any alcohol-related misdemeanor or facing any pending criminal charges? (if yes, attach explanation);

Yes No Has Applicant or anyone listed on **Attachment A** ever held any interest in any other business licensed for the sale of alcoholic beverages? (if yes, attach explanation);

Yes No Does anyone have any financial interest in the Applicant's business not previously listed on **Attachment A**, including silent partners, private financial loans, etc.? (if yes, list below, attach additional sheet if necessary);

Name _____ Phone: _____

Address _____ Ownership interest _____

MANAGER INFORMATION (local manager in charge of selling alcohol)

Manager's name _____

Length of Idaho residency _____ Date of Birth _____

PROPERTY INFORMATION

Premises are owned leased/rented

Building owner name _____

If same as applicant, move on to premises section.

Building owner address _____

Building owner contact email _____

Building owner home phone: _____ Building owner cell phone: _____

Premises are within 300 feet of a public school, church, or any other place of worship Yes No

If premises are owned / mortgaged, include the deed.

If premises are leased or rented, attach a copy of lease or other instrument indicating plainly thereon the clause, which constitutes owner's consent to the sale of alcohol on the premises.

PREMISES DIAGRAM / FLOOR PLAN

Attach a diagram (no architectural blue prints) showing the entire area proposed to be licensed to sell, serve, dispense or store alcoholic beverages. **See Attachment B for details and sample drawing.** If applying for a sidewalk café, include the café area as well. The diagram should be on paper no larger than 8.5" x 11" and include the following:

- 1) dimensions of the premises sought to be licensed, including the sidewalk café area if applicable;
- 2) location of every entrance and exit to and from the premises;
- 3) location of every wall and interior partition of the premises;

- 4) location of the bar or bars from which beer will be dispensed;
- 5) location of the kitchen and kitchen facilities, if any;
- 6) location of the area wherein food and/or meals, if any, will be served to the public;
- 7) location of the lavatories and washrooms;
- 8) seating arrangement including location of tables, chairs and stools in the areas where beer, food and meals, and each of them will be served;
- 9) dimensions of each such area and room within the licensed premises;
- 10) location and dimensions of the access to the premises from the public street(s) of the City;
- 11) location and dimensions of the fire lane(s), if any, adjacent to the premises;
- 12) location and dimensions of the parking area, if any, for patrons using the premises.

RESTAURANT CERTIFICATION

Is the business a full-service restaurant? No Yes

If yes, please read the following paragraph and certify with your signature.

If no, proceed to Hold Harmless.

I, _____, (applicant name) being first duly sworn on oath, depose and agree that:

- I am connected with the above business as the _____ (owner, partner, officer);
- the premises for which said license above-specified has been issued, are now and will continue to be, premises constituting and operating as a “restaurant” as defined by Moscow City Code Title 9, Section 6-2, to-wit: Restaurant: any restaurant, café, hotel dining room, coffee shop, cafeteria, railroad dining car or other eating establishment having kitchen and cooking facilities for the preparation of food and where hot meals are regularly served to the public;
- this application and statement under oath is made for the purpose of obtaining a certificate showing the beer license has been issued for premises which constitute and are being operated as a restaurant;
- the premises for which application is made has a kitchen and cooking facilities and hot meals are regularly served to the public at said premises.

Applicant's signature

AFFIRMATIONS

- Yes No The applicant and/or anyone listed on **Attachment A** is the bona fide owner of the business which will be engaged in the sale of beer at retail and with respect to which such license is sought (*if no, attach explanation*);
- Yes No The applicant, and/or each person employed by an applicant whose duties include the serving or dispensing of beer, and/or anyone listed on **Attachment A** is not less than nineteen (19) years of age (*if no, attach explanation*);
- Yes No The condition and location of the proposed premises to sell beer at retail conforms to all laws and regulations of the State of Idaho and to the ordinances of the County of Latah, Idaho, and the City of Moscow applicable thereto relating to public health and safety and to the zoning ordinances of the City (*if no, attach explanation*);
- Yes No Is there is a stamp or permit outstanding and in force which has been issued to any person by the United States government for the premises for which license to sell beer at retail is sought which stamp or permit denotes payment of any special tax imposed by the United States government on a retail dealer in liquor or wines unless said premises are premises for which a retail license for sale of liquor by the drink issued under the provisions of Chapter 9, Title 23, Idaho Code (*if yes, attach explanation*);
- Yes No Have you, the manager, employee, or anyone listed on **Attachment A**, within three (3) years immediately preceding the date of filing the application, been convicted of the violation of any law of the State, or any other State, or of the United States, or of any ordinance of any county or of the City, regulating, governing or prohibiting the sale, manufacture, transportation or

possession of alcoholic beverages, intoxicating liquors, narcotic drugs or controlled substances, or within said time, suffered the forfeiture of a bond for failure to appear in answer to charges of any such violation (if yes, attach explanation);

Yes No Have you, the manager, employee, or anyone listed on **Attachment A** within five (5) years preceding the date of filing the application, been convicted of any felony or paid any fine or completed any sentence of confinement (if yes, attach explanation);

Yes No Have you, the manager, employee or anyone listed on **Attachment A** within three (3) years immediately preceding the date of filing the application had any license provided for in Moscow City Code, or any license or permit issued to the applicant pursuant to the law or ordinance of the State, or any other state, or of the United States, or of the City, to sell, manufacture, transport or possess alcoholic beverages or intoxicating liquors revoked (if yes, attach explanation).

HOLD HARMLESS

I, _____(applicant name) shall indemnify and hold harmless the City of Moscow from and for any and all losses, claims, actions, judgements for damages or injury to persons and property and losses and expenses caused or incurred by _____(business name), its servants, agents, employees, guests and business invitees, and not caused by or arising out of the tortious conduct of the City of Moscow or its employees.

Applicant's signature

FINAL CERTIFICATION

I have read the foregoing and understand that the terms of this Agreement are contractually and legally binding and that no verbal statement to the contrary, by any person or entity, can void or alter the terms of this Agreement. By signing below, I, _____, certify under penalty of perjury pursuant to the law of the State of Idaho, that the foregoing is true and correct.

Applicant's Signature

Date

STATE OF _____)
) ss:
County of _____)

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

<SEAL>

Residing at _____

My Commission Expires: _____

A copy of the State of Idaho and Latah County alcohol licenses are required. Return application to City Clerk, 206 E 3rd Street, Room 304 or PO Box 9203, Moscow ID 83843.

CITY OF MOSCOW
CORPORATION / PARTNERSHIP / ASSOCIATION



Date: _____

BUSINESS INFORMATION

Business name (DBA) _____ Business Phone # _____

Business contact person _____ Cell Phone # _____

APPLICANT INFORMATION

Applicant is a Partnership Corporation Association

Provide partner / officer / director information below.

Name (*print - last, first, middle*) _____

List any and all previous names _____

Title _____ U.S. Citizen Yes No Date of birth _____

Address _____ Length of Idaho residency _____

Name (*print - last, first, middle*) _____

List any and all previous names _____

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Name (*print - last, first, middle*) _____

List any and all previous names _____

Title _____ U.S. Citizen Yes No Date of birth _____

Address _____ Length of Idaho residency _____

If a CORPORATION or ASSOCIATION, provide a copy of corporation papers and by-laws.

Date of incorporation/organization _____ Place of incorporation/organization _____

Principal business address in Idaho _____

**CITY OF MOSCOW
BEER, WINE AND/OR LIQUOR LICENSE
DIAGRAM OF PREMISES**



Date: _____

BUSINESS INFORMATION

Business name (DBA) _____ Business Phone # _____

Business contact person _____ Cell Phone # _____

PREMISES DIAGRAM / FLOOR PLAN

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