WLD-031 (4/14)

FOR NEW LICENSES AND TRANSFER

LICENSE AND/OR PERMIT APPLICATION

FOR LIQUOR, COUNTY MALT BEVERAGE, LIMITED, WINERY OR MICROBREWERY

To be completed by the City, Town or County Clerk:

Date Filed: _____/_____/_____

	Annual Fee	Prorated Fee
Basic Fee:	$ _____.___	$ _____.___
Add'l Dispensing Room Fee:	$ _____.___	$ _____.___
Transfer Fee:	$ _____.___	
Total License Fee Collected	$ _____.___	$ _____.___
Publishing Fee Collect:	$ _____.___	

Required Attachments Received: Yes ☐

Advertising Dates(2 wks): _____

Hearing Date: _____/_____/_____

Local Licensing Number: _____

For the license term: _____/_____/_____
Month Day Year

Through: _____/_____/_____
Month Day Year

A copy must be immediately forwarded to:
State of Wyoming Liquor Division
6601 Campstool Rd.
Cheyenne WY 82002-0110

Formerly Held by:_____

Applicant: _____

Trade Name (dba): _____

Premise Address: _____
Number & Street

_____
City State Zip County

Mailing Address: _____
Number & Street or P.O. Box

_____
City State Zip

Business Telephone Number: (_____)_____

Fax Number: (_____)_____

E-Mail Address:_____

LICENSING AUTHORITY: Begin publishing promptly. As W.S. 12-4-104(d) specifies: **NO LICENSING AUTHORITY SHALL APPROVE OR DENY THE APPLICATION UNTIL THE LIQUOR DIVISION HAS CERTIFIED THE APPLICATION IS COMPLETE.**

FILING FOR
- ☐ NEW
- ☐ TRANSFER LOCATION
- ☐ TRANSFER OWNERSHIP

FILING IN (CHOOSE ONLY ONE)
- ☐ CITY OF _____
- ☐ COUNTY OF _____

FILING AS (CHOOSE ONLY ONE)
- ☐ INDIVIDUAL ☐ LLC
- ☐ PARTNERSHIP ☐ LLP
- ☐ CORPORATION
- ☐ LTD PARTNERSHIP
- ☐ ASSOCIATION
- ☐ ORGANIZATION

TYPE OF LICENSE OR PERMIT
(CHOOSE ONLY ONE)
- ☐ RETAIL LIQUOR LICENSE
  - ☐ on-premise only (Bar)
  - ☐ off-premise only (Package Store)
  - ☐ combination on/off premise (Both)
- ☐ RESTAURANT LIQUOR LICENSE
- ☐ RESORT LIQUOR LICENSE
- ☐ COUNTY RETAIL or SPECIAL MALT BEVERAGE PERMIT
- ☐ VETERANS CLUB
- ☐ FRATERNAL CLUB
- ☐ GOLF CLUB
- ☐ SOCIAL CLUB
- ☐ MICROBREWERY
- ☐ WINERY
- ☐ BAR AND GRILL
- ☐ LOCATED WITHIN 5 MILES OF CITY (County License only)

To Assist the Liquor Division with scheduling inspections:

DO YOU OPERATE?

☐ FULL TIME (e.g. Jan through Dec)

☐ SEASONAL/PART-TIME

(specify months of operation)

from _____ to _____

DAYS OF WEEK (e.g. Mon through Sat)

_____

HOURS OF OPERATION (e.g. 10a - 2a)

_____

_____

1. Location of License:

(a) Give a description of the dispensing room and state where it is located in the building (e.g. 10 x 12 room in SE corner of 1st floor of building). If the building is not in existence, provide the location and an architect's drawing or suitable plans of the room and premises to be licensed: W.S. 12-4-102(a)(i): (Please submit a drawing of the establishment that includes the dispensing room)

_____

(b) If **Winery** or **Microbrewery**, also list manufacturing facility.(e.g. MFG: 10' X 12' room in SW portion of bldg.)

_____

(c) Do you have an additional dispensing room? ☐ YES ☐ NO If yes, provide description and location:

_____

(d) Provide the legal description and the zoning of the site where the applicant will conduct business:

_____

2. Do you W.S. 12-4-103 (a) (iii):

(1) **OWN** the building in which sales room is located? ☐ YES (own)

(2) **LEASE** the building in which sales room is located? ☐ YES (lease)

(A) **DATE** lease expires _____ located on page_____paragraph_____of lease document.

(B) Provision for **SALE** of alcoholic or malt beverages located on page_____paragraph_____of lease.

NOTE: Attach a true copy of the lease to application. Lease MUST contain provision for SALE OF ALCOHOLIC or MALT BEVERAGES and be valid THROUGH the TERM OF THE LICENSE W.S. 12-4-103(a)(iii).

3. Have you already assigned, leased, transferred or do you intend to assign, lease, transfer, contract or in any other manner agree with any person or firm other than yourself as licensee to operate and assert control or partial control of the license and the licensed room to carry on the licensed liquor business? ☐ YES ☐ NO

4. Does any manufacturer, brewer, rectifier, wholesaler, or through a subsidiary affiliate, officer, director or member of any such firm: W.S. 12-5-401, 12-5-402, 12-5-403

(a) Hold any interest in the license applied for? ☐YES ☐ NO

(b) Furnish by way of loan or any other money or financial assistance for purposes hereof in your business? ☐ YES ☐ NO

(c) Furnish, give, rent or loan any equipment, fixtures, interior decorations or signs other than standard brewery or manufacturer's signs? ☐ YES ☐ NO

(d) If you answered **YES** to any of the above, explain fully and submit any documents in connection therewith:

_____

5. Does applicant have any interest or intent to acquire an interest in any other retail liquor license to be issued by this licensing authority? W.S. 12-4-103(b) ☐ YES ☐ NO

If "YES", explain: _____

6. Is applicant a mayor, member of a city or town council, or member of the board of county commissioners within the jurisdiction of this licensing authority? W.S. 12-4-103(a)(i) ☐ YES ☐ NO

7. Is applicant employed by the State, City or Town, or County as a law enforcement officer, or hold office as a law enforcement officer through election? W.S. 12-4-103(a)(ii) ☐ YES ☐ NO

RESTAURANT OR BAR AND GRILL LICENSE: Complete questions 8(a) and 8(b):

8. (a) Have you submitted a valid food service permit upon application? W.S. 12-4-407(a) W.S. 12-4-413(a) ☐ YES ☐ NO

(b) Was your dispensing room for alcoholic and/or malt beverages in existence and open for consumption purposes prior to February 1, 1979? W.S. 12-4-410(b) ☐YES ☐NO ☐N/A

RESORT LICENSE: Complete questions 9(a) through 9(c):

9. (a) Is the actual valuation of the resort complex at least one million dollars, or have you committed or expended at least one million dollars ($1,000,000.00) on the complex, excluding the value of the land? W.S. 12-4-401(b)(i) ☐YES ☐NO

(b) Does the resort complex include a restaurant and a convention facility which will seat at least one hundred (100) persons? W.S. 12-4-401(b)(ii) ☐YES ☐NO

(c) Does the resort complex include motel or hotel accommodations with at least one hundred (100) sleeping rooms? W.S. 12-4-401(b)(iii) ☐YES ☐NO

MICROBREWERY AND/OR WINERY LICENSE: Complete questions 10 through 11:

10. Is premise to be co-existent with a retail, restaurant, resort or bar and grill liquor license? W.S. 12-4-412(b)(iii) ☐YES ☐NO

If "YES", please specify type: ☐ Microbrewery ☐ Winery ☐ Retail ☐ Restaurant ☐ Resort ☐ Bar & Grill:

11. (a) Do you self distribute your products? ☐YES ☐NO

(b) Do you distribute your products through an existing malt beverage wholesaler? ☐YES ☐NO

ORGANIZATION AND/OR CLUB LICENSE: Complete questions 12 through 15 as applicable:

12. FRATERNAL CLUBS W.S. 12-1-101(a)(iii)(B)

(a) The name and address of the grand lodge or national organization is:

_____

(b) Does lodge or fraternal organization hold a charter from a national organization or national grand lodge? ☐YES ☐NO

(c) Has the fraternal organization been actively operating in at least thirty-six (36) states? ☐YES ☐NO

(d) Has the fraternal organization been actively in existence for at least twenty (20) years? ☐YES ☐NO

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13. VETERANS CLUBS W.S. 12-1-101(a)(iii)(A):

(a) The name and address of the National Veterans organization is:

_____

(b) Has the Veteran's organization been chartered by the Congress of the United States for patriotic, fraternal or benevolent purposes? ☐YES ☐NO

(c) Is the membership of the Veteran's organization comprised only of Veterans and its duly organized auxiliary? ☐YES ☐NO

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14. SOCIAL CLUBS W.S. 12-1-101(a)(iii)(E):

(a) Do you have more than one hundred (100) bona fide members who are residents of the county in which the club is located? ☐YES ☐NO

(b) Is the club incorporated and operating solely as a nonprofit organization under the laws of this state? ☐YES ☐NO

(c) Is the club qualified as a tax exempt organization under the Internal Revenue Service? ☐YES ☐NO

(d) Has the club been in continuous operation for a period of not less than one (1) year? ☐YES ☐NO

(e) Has the club received twenty-five dollars ($25.00) from each bona fide member as recorded by the secretary of the club and are club members at the time of this application in good standing by having paid at least one (1) full year in dues? ☐YES ☐NO

(f) Does the club hold quarterly meetings and have an actively engaged membership carrying out the objectives of the club? ☐YES ☐NO

(g) Have you filed a true copy of your bylaws with the local licensing authority and the Wyoming Liquor Division? ☐YES ☐NO

(h) Has at least fifty one percent (51%) of the membership signed a petition indicating a desire to secure a Limited Retail Liquor License?
(THE PETITION MUST BE ATTACHED TO APPLICATION) ☐YES ☐NO

(i) Have you filed with the licensing authority and the Wyoming Liquor Division a detailed statement of your activities during the preceding year which were undertaken or furthered in pursuit of the objectives of the club, along with an itemized statement expended for such activities? ☐YES ☐NO

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15. GOLF CLUBS W.S. 12-1-101(a)(iii)(D):

(a) Do you have more than fifty (50) bona fide members? ☐YES ☐NO

(b) Do you own, maintain, or operate a bona fide golf course together with clubhouse? ☐YES ☐NO

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16. (a) **If applicant is an Individual or Partnership:** State the name, date of birth and residence of each applicant or partner, if the application is made by more than one individual or by a partnership.
If the application is for a Club: State the name, date of birth and residence of each officer.

True and Correct Name	Date of Birth	***DONOT LIST PO BOXES*** Residence Address No. & Street City, State & Zip	Residence Phone Number	Have you been a DOMICILED resident for at least 1 year and not claimed residence in any other state in the last year?	Have you been Convicted of a Felony Violation?	Have you been Convicted of a Violation Relating to Alcoholic Liquor or Malt Beverages?
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐
				YES ☐ NO ☐	YES ☐ NO ☐	YES ☐ NO ☐

(If more information is required, list on a separate piece of paper and attach to this application.)

(b) **If the applicant is a Corporation, Limited Liability Company, Limited Liability Partnership or Limited Partnership:** State the name, date of birth and residence of each stockholder holding, either jointly or severally, ten percent (10%) or more of the outstanding and issued capital stock of the corporation, limited liability company, limited liability partnership, or limited partnership, **and** every officer, **and** every director.

True and Correct Name	Date of Birth	***DONOT LIST PO BOXES*** Residence Address No. & Street City, State & Zip	Residence Phone Number	No. of Years in Corp or LLC	% of Stock Held	Have you been Convicted of a Felony Violation?	Have you been Convicted of a Violation Relating to Alcoholic Liquor or Malt Beverages?
						YES ☐ NO ☐	YES ☐ NO ☐
						YES ☐ NO ☐	YES ☐ NO ☐
						YES ☐ NO ☐	YES ☐ NO ☐
						YES ☐ NO ☐	YES ☐ NO ☐
						YES ☐ NO ☐	YES ☐ NO ☐

(If more information is required, list on a separate piece of paper and attach to this application.)

OATH OR VERIFICATION

*(Requires signatures by **ALL** Individuals, **ALL** Partners, **ONE (1)** LLC Member, or **TWO (2**) Corporate Officers or Directors except that if all the stock of the corporation is owned by **ONE (1)** individual then that individual may sign and verify the application upon his oath, or **TWO (2)** Club Officers.) W.S. 12-4-102(b)*

Under penalty of perjury, and the possible revocation or cancellation of the license, I swear the above stated facts, are true and accurate.

STATE OF WYOMING)
SS.
COUNTY OF _____)

Before Me, _____, (specify)
(Printed name of Notary or other officer authorized to administer oaths)

a Notary Public, Officer authorized to administer oaths in and for
_____County, State of Wyoming, personally appeared

_____name he/she being first duly sworn
(Insert Names)
by me upon his oath, says that the facts alleged in the foregoing instrument are true.

(Seal)

1._____

2._____

3._____

My Commission expires: _____

4._____

Witness my hand and official seal:

_____
(Notary Public or other officer authorized to administer oaths)

Title _____ *Dated: _____*

REQUIRED ATTACHMENTS:

(a) Attach any lease agreements W.S. 12-4-103 (a) (iii).
(b) If the building is not in existence, an architect's drawing or suitable plans of the room and the premises to be licensed must be attached W.S. 12-4-102 (a) (i).
(c) A statement indicating the financial condition and financial stability of the applicant W.S. 12-4-102 (a) (vi).
(d) Restaurant or Bar & Grill Liquor License applicants must include a copy of the CURRENT food service permit W.S. 12-4-407 (a) or 12-4-413 (a).
(e) Include a drawing of the dispensing room W.S. 12-5-201 (a).
(f) Check or bank draft as payment for the application and publishing the notice of application (Direct billing is permissible for publication fees) W.S. 12-4-101-4 (a).
(g) If transferring a license from one ownership to another, a form of assignment from the current licensee to the new applicant authorizing the transfer W.S. 12-4-601 (b).

ADVERTISING REQUIREMENTS W.S. 12-4-104(a):

When an application for a license, permit, renewal or any transfer of location or ownership thereof has been filed with a licensing authority, the clerk shall promptly prepare a notice of application, place the notice conspicuously upon the premises shown by the application as the proposed place of sale and public the notice in a newspaper of local circulation once a week for four (2) consecutive weeks. The notice shall state that a named applicant has applied for a license, permit, renewal or transfer thereof, and that protests against the issuance, renewal, or transfer of the license or permit will be heard at a designated meeting of the licensing authority.

FOR LIQUOR DIVISION USE ONLY		
Reviewer	Initials	Date
Agent:		
Chief:		
Acct.:		