

**RENEWAL
APPLICATION FOR LICENSE
FOR THE SALE OF INTOXICATING LIQUOR**

Date _____

Name and address of applicant _____

Name and address of legally responsible managing officer _____

Date of Birth _____ Social Security No. _____

Phone Number _____

Are you a native born or naturalized citizen of the United States? _____

State whether ever convicted of any violation of any ordinance of the City of Marshfield, Missouri, or of any other municipality. If answer is "Yes", state the date, place, court, type of offense and the penalty assessed _____

State whether you have ever been convicted of any criminal offense against the laws of any State or the Federal government. If the answer is "Yes", state the date, place, court, type of offense and the penalty assessed:

Have you ever before been a licensee to sell intoxicating liquor and/or malt liquor? If you have, state when and where and whether you have ever had a revocation of a license:

State the **name as you want it to appear on the license, exact location where the applicant expects to conduct the business and mailing address** (if different than location):

Description of property where sales will be conducted: _____

State the type of business which the applicant expects to conduct in conjunction with the sale of intoxicating liquor and/or malt liquor:

Liquor License Checklist:

- Completed Liquor License Application
- Certificate of Liability Insurance
- Copy of the Applicant's Driver's License
- Copy of Applicant's Voter Registration Card
- Missouri No Tax Due Certificate
- List of names & addresses of people with a financial interest in this business
- Fee for type of liquor license requested
- Liquor License from the State of Missouri
- Applicant background check (completed in our office)

Incomplete applications will not be processed.