

TEMPORARY PERMIT APPLICATION

STATE LICENSE NO. _____
EXPIRATION DATE _____

Please submit a diagram of the property on which the event is being held along with the \$25.00 application fee.

Business Information

Business Name: _____
Mailing Address: _____ Phone No. _____

Applicant Information

Name: _____ Sex: _____
Social Security No. _____ Date of Birth: _____
Home Address: _____
_____ Phone No. _____
Spouse's Name (If Applicable) _____

Group for which event is planned: _____
Date & Time of Event: _____

State Temporary Permit Completed? ___ Yes ___ No

I, _____, the above named applicant state that I have read the contents of the application and all the information it contains is true and correct. I have been provided with a copy and read Sections 3-419 through 3-423 of the City Code pertaining to the regulations in obtaining the license herein applied for, and affirmatively state neither I, nor any other person having an interest in this event, are ineligible to receive a license under its terms. Furthermore, I hereby agree to comply with all the laws of the State of Kansas, and all the rules and regulations presented by you, and I consent to the immediate revocation of my temporary liquor license by the proper officials for any violations of such laws, rules or regulations.

Applicant Signature – Notarized

Dated this _____ Day of _____, 20____

_____ My appointment expires on the ___ day of _____, 20__.
Notary Public