## PLEASE READ INSTRUCTIONS THOROUGHLY!

Please complete the attached renewal application for a Liquor License and return it with the following items to the City of Jamestown, $1023^{\text {rd }}$ Avenue SE, Jamestown, ND 58401:

$$
\begin{array}{cc}
\text { 1. License Fee: On Sale } & \$ 3,500.00 \\
\text { Off Sale } & \$ 3,500.00 \\
\text { On-Off Sale } & \$ 4,500.00 \\
\text { (Check should be made payable to the City of Jamestown) } \\
& \\
\text { 2. License Bond to the City of Jamestown in the } \\
\text { amount of } \$ 10,000.00 \text { with an expiration date } \\
\text { of June } 30^{\text {th }} \text { to concur with the license } \\
\text { expiration date. The signatures of the principal } \\
\text { and the Attorney-in-Fact must be notarized. } \\
\text { No Copies accepted - Original Bonds \& Signatures only }
\end{array}
$$

License fees may be paid in full at this time or you may pay $1 / 2$ now and the balance on or before December 15th. Failure to pay the fee on time will automatically result in the cancellation of your license.

# CITY OF JAMESTOWN <br> 102 3RD AVENUE SE <br> JAMESTOWN, NORTH DAKOTA 58401 <br> TELEPHONE 701-252-5900 FAX 701-252-5903 

RENEWAL APPLICATION FOR A LIQUOR LICENSE
JULY 1ST THROUGH JUNE 30TH
(Check type of license requested)

) ON SALE
) OFF SALE
) ON-OFF SALE

LICENSE FEE
\$3,500.00
\$3,500.00
\$4,500.00

REQUIRED BOND
\$10,000.00
$\$ 10,000.00$
$\$ 10,000.00$
$* * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * * *$

1. LICENSE IS TO BE ISSUED IN THE FOLLOWING NAME:
(indicate whether individual, partnership or corporation)
2. ADDRESS OF PREMISES TO BE LICENSED: $\qquad$
3. Are the taxes on such real estate and personal property paid up to date? Yes $\qquad$ No $\qquad$
4. APPLICANT IS:
A. INDIVIDUAL:

Name: $\qquad$ Date of Birth $\qquad$
Residence: $\qquad$
B. PARTNERSHIP:

Name of Partnership: $\qquad$
Residence of Partnership: $\qquad$
Name \& Age of Each Partner: $\qquad$
C. CORPORATION:

Name of Corporation: $\qquad$
Where Incorporated:
Name, Age \& Place of Residence of Each Corporation Officer
5. State Alcoholic Beverage License Number $\qquad$
6. The application represents that the proposed licensee is a citizen of the State of North Dakota and the owner of the business being conducted at the location to be licensed and is duly qualified to receive such license pursuant to the laws of the United States, the laws of North Dakota, and the ordinances and regulations of the above named city. The applicant accepts such license when issued subject to all the conditions of the ordinances of such city and agrees that the Mayor or any officer of the Health Department or Police Department of such city may, at any time, enter upon the licensed premises for the purpose of police inspection or to determine whether the business is being conducted in compliance with the ordinances of the above named city, and hereby waives the issuance of search warrant or other legal process as a condition to the entry upon and inspection or search of such premises.

