CITY OF BEAUMONT
RENEWAL APPLICATION FOR ALCOHOLIC BEVERAGES PERMIT

Applicant: Applicant must submit all prescribe fees with completed applications.

Type of Permit(s) applied for: _____

Application Date: _____ / _____ /_____

LEGAL OPERATOR(S) INFORMATION

Print full name(s) of legal operator(s):

_____
| Last | First | Middle Initial | Suffix | Date of Birth | Social Security No. |

_____
| Last | First | Middle Initial | Suffix | Date of Birth | Social Security No. |

_____
| Last | First | Middle Initial | Suffix | Date of Birth | Social Security No. |

(If additional space is necessary use a separate sheet)

Hereby make application to operate doing business as:

_____
Name of Business   Street Address   Zip Code

_____
Operator's Phone Number (24 hour access)   Driver's License or Identification Number   Operator's E-mail Address

Has this business ever operated under a different Trade Name: ☐ Yes ☐ No (Check One.) If yes, complete the following:

_____
Name of Business   Previous Trade Name

Are you the legal owner of the property? ☐ Yes ☐ No (Check One.) If no, complete the following:

_____
Property Owner's Name   Street Address   Zip Code

_____
Property Owner's Phone Number   Property Owner's E-mail Address

Is this an existing business that is changing locations: ☐ Yes ☐ No (Check One.) If yes, complete the following:

_____
Name of Business

_____
Previous Address   City   State   Zip Code

Primary Business: _____
Will your establishment have gaming machines? ☐ Yes ☐ No
Will your establishment have sexually oriented entertainment? ☐ Yes ☐ No

In full compliance with the ordinance provision of the City of Beaumont Code of Ordinances, Chapter 6 which regulates the conduct of such places, I hereby certify that I fully understand and agree that such permit may be revoked in the event this facility is not operated in accordance with the state law and local ordinance. I am applying for the renewal of an alcoholic beverage permit and certify that all information submitted in this application is true and correct, and that there have been no material changes in the business, such as ownership. I understand that any false or misleading information shall cause my application to be denied; my permit revoked, and subjects me to criminal prosecution.

Signature(s) _____