

City of West Plains City Clerk's Office 1910 Holiday Lane West Plains, Mo. 417.256.7176, ext. 2235

	Liquor Licens New	e Application Renewal	on		
Business Name		_		MO Retail Sa	les I.D. (8 digits)
Business Street Address	City		State	е	Zip
Owner's Name	Primary	Phone			Email Address
I, manager of the above-named busir	, am and will continess, and am applying for the				e owner or
Liquor By Drink (\$750 fee)	Re	sort/Sunday	/ Sales (\$750)	
Tavern (\$75)		Resort Only (\$450)			
Beer & Wine 5% (\$75)		Su	nday Sales (Only (\$300)	
Distributor (\$150)		Or	iginal Packa	ge (\$150)	
	Personal In	formation			
Residential Address	City	State	Zip	Years Lived There	
Birthplace (City)	State	Zip)	Date of Birth	
Driver's License # State Issued	SSN (Last 4 digits)	U.S. Citizen? (Yes/No/Naturalized)			
☐ No ☐ Yes In the	past 3 years I have been den	ied a liquor licens	se issued by	any state.	
☐ No ☐ Yes In the	past 3 years I have been con	victed for an offe	nse related	to intoxicating	

liquor, drugs, gambling, immorality, fighting or peace disturbance.

(MSHP Request for Criminal Record Check form attached)

I consent to a criminal background check to verify the above information.

Yes



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Applicant Information and Signature

	his application has been examined by me and that lains' tax regulations and, to the best of my knowle	
Applicant Signature	Printed Name	Date
	For Office Use Only	
Approved By	Amount Paid	Paid Date
Business License Number	Effective Date	Expiration Date