



APPLICATION FOR LOCAL RETAILER PERMIT TO SELL ALCOHOLIC BEVERAGES IN THE PARISH OF WEST FELICIANA

Date _____

TO THE HONORABLE COUNCIL, PARISH OF WEST FELICIANA, LOUISIANA:

I hereby apply for a Permit to sell alcoholic liquors, whiskey, wines, beer and other alcoholic liquors and beverages within the unincorporated area of the Parish of West Feliciana, Louisiana at the following premises:

In connection with this application, I hereby declare under oath that the following statements are true and correct:

My full name is _____; my

home address is _____. I am over the age of twenty-one years and have been a resident of the State of Louisiana continuously for a period of two years or more next preceding the date hereof. I am the owner (or bona fide Lessee underwritten lease) of the above mentioned premises.

I have not been convicted of a felony under the laws of the United States, the State of Louisiana or any other state or country.

I have not had a license or permit to sell or deal in alcoholic beverages, issued by the United States or any state revoked at any time during the five years next preceding this application, or been convicted or had judgment rendered against me, within said period, involving alcoholic beverages by this or any other state or by the United States.

I have not been convicted in this or in any other state or by the United States for soliciting for prostitution, pandering, letting premises for prostitution, contributing to the delinquency of juveniles, keeping a disorderly place, letting a disorderly place or illegally dealing in narcotics.

I have not been convicted of violating any municipal or parish ordinance regulating the sale of beverages of low alcoholic content adopted pursuant to R. S. 26:494.

The following persons are partners or financial backers with me in this business: (State names and addresses of any partners or financial backer. If none, so state) _____

I further declare that the above persons (if any) associated with me in this business have the above qualifications required by law.

APPLICANT

SWORN TO AND SUBSCRIBED BEFORE

ME THIS _____ DAY OF _____

_____, 20_____

NOTARY PUBLIC

Please select type of license below:

- BEER Only (Package Sales ONLY)
- BEER Only (On-Site Consumption)
- Liquor and Beer (Package Sales ONLY)
- Liquor and Beer (On-Site Consumption)

(Penalty for false swearing may be fine of \$500.00 or imprisonment for one year)