



# RETAIL ALCOHOL BEVERAGE LICENSE APPLICATION

AS THE HOLDER OF CURRENT VALID STATE OF IDAHO AND BONNER COUNTY ALCOHOL LICENSES, I HEREBY MAKE APPLICATION TO THE CITY OF SANDPOINT FOR THE FOLLOWING SANDPOINT RETAIL ALCOHOL BEVERAGE LICENSE(S) FOR THE YEAR \_\_\_\_\_.

- |                      |          |  |                 |
|----------------------|----------|--|-----------------|
| 1.                   | \$200.00 | BEER – ON PREMISE                        | \$ _____        |
|                      | \$ 50.00 | BEER – OFF PREMISE (cans, bottles to go) | \$ _____        |
|                      | \$200.00 | WINE                                     | \$ _____        |
|                      | \$562.50 | LIQUOR                                   | \$ _____        |
| <b>TOTAL FEE DUE</b> |          |  | <b>\$ _____</b> |

2. NAME OF APPLICANT(S): \_\_\_\_\_  
(as reflected on State license)

3. DOING BUSINESS AS: \_\_\_\_\_  
(as reflected on State license)

4. List **all** owners, corporate officers, partners, or LLC members (anyone who has **ownership interest** in the business **or** anyone who is a **corporate officer**, if the business is a corporation). *This information should **match** what was provided on the **State application**.* Attach separate sheet, if necessary.

\_\_\_\_\_  
\_\_\_\_\_

5. LOCATION OF BUSINESS (physical address): \_\_\_\_\_ Sandpoint, ID

6. MAILING ADDRESS (if different from location): \_\_\_\_\_  
\_\_\_\_\_

7. BUSINESS PHONE #: \_\_\_\_\_ EMERGENCY PHONE #: \_\_\_\_\_

8. STATE ALCOHOL LICENSE #: \_\_\_\_\_ COUNTY ALCOHOL LICENSE #: \_\_\_\_\_

9. CITY OF SANDPOINT GENERAL BUSINESS LICENSE #: \_\_\_\_\_ (for physical address above)

I, the undersigned, hereby apply for a Sandpoint Retail Alcohol Beverage License.

\_\_\_\_\_  
**Signature** of one of the individuals listed under #4, above Title (i.e., Owner, President, Member, etc.)

\_\_\_\_\_  
Name of person who signed (typed or printed legibly) Phone number of person who signed

*For City of Sandpoint Office Use Only*

**CITY ALCOHOL LICENSE #** \_\_\_\_\_

Issued the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_. Issued by: \_\_\_\_\_

check # \_\_\_\_\_

cash receipt # \_\_\_\_\_

to Finance Department date \_\_\_\_\_

Sandpoint City Hall  
1123 Lake St., Sandpoint, ID  
(208) 263-3158

