

CITY OF WESTON, MISSOURI
APPLICATION FOR LIQUOR EMPLOYEE'S PERMIT

Name: _____ Date: _____
Legal Name with middle initial (please print)

Address _____ City/State/Zip _____

Telephone _____ Sex _____

Date of birth _____ Social Security Number _____

Driver's License Number _____ Driver's License State _____

Year & Make of Car _____ Car License Plate Number _____ State _____

Have you ever been arrested or indicted for the violation of any Federal Law, Law of the State of Missouri, or of any other state? Yes No

If yes, please give details: _____

Have you ever been convicted of a felony? Yes No

Have you ever been convicted of any crime in any Missouri Court, any court of any other state, or in any federal court? Yes No

If yes, please give details including minor traffic violations (list date, place and disposition) _____

I hereby certify that I have answered the questions listed above to the best of my knowledge and that the answers are true.

Signature of Applicant

Place of business: _____

Address: _____

Approved by: _____
Signature of Manager/Owner

1-31-2015 FOR OFFICE USE ONLY: Recommendation:

By: _____ Date: _____