



DUCHEсне COUNTY
Beer License Application

TO BE COMPLETED BY APPLICANT – PLEASE PRINT

Applicant's Name: Last: _____ First: _____ Middle: _____

Applicant's Address: _____

Applicant's Date of Birth: _____ Applicant's Social Security #: _____

Applicant's Drivers License #: _____ State issued by: _____

Name of Business: _____

Location of Business: _____

Business Owner Name: Last: _____ First: _____ Middle: _____

Business Phone Number: _____ Business Owner Phone Number: _____

References: 1) _____ Phone: _____

2) _____ Phone: _____

3) _____ Phone: _____

I understand that I am subject to the liquor laws of the State of Utah, Duchesne County, and acknowledge that I am subject to criminal proceedings and suspension of my license if found in violation of these laws and/or ordinances. I further certify that I have never been convicted of any felony or liquor law violations.

Applicant's Signature

Date

TO BE COMPLETED BY INVESTIGATOR

Investigation Results:

Photograph: _____ Fingerprints: _____

Signature of Investigator

TO BE COMPLETED BY DUCHEсне COUNTY BOARD OF COMMISSIONERS

Disapproval: _____ Approval: _____ License # _____ Class: _____

Signature of Commissioner