

LIQUOR LICENSE APPLICATION

I, the undersigned, do hereby apply to the City of Sikeston, for the license described below on the premises described below, for the purpose of inducing the City of Sikeston to issue me said license. I make the statements and answers hereinafter set out and understand and agree that if any statements or answers made herein are untrue, and the license herein applied for is granted, such license may be revoked by said City. I further affirm that I and all my employees are of good moral character and that if I, or any of my employees, shall violate the provisions of any ordinance of said City, or knowingly allow any other person to do so upon the licensed premises, that said City may revoke the license granted hereunder. Applicant further agrees that if the license is granted, inspection may be made in accordance with the law.

Please complete the following:

1.	Applicant:			
	(If partnership see page 2, for a corporation see page 3.)			
2.	Applicant's Address:			
	Street/P.O. Box			
	City State Zip Code			
	Email Address:			
3.	Cell Phone:			
4.	Social Security Number or FEIN:			
5.	Date of Birth: Phone Number:			
6.	Missouri Tax Identification Number:			
7.	Position:Owner Manager Managing Officer (Corporation)			
8.	Type of License(s) Sought:			
9.	Address/Location of Premises:			
,.				
10.	Name of Business:			
11.	Owner of Premises:			

12. If applicant is not the owner of the premises then state the nature of applicant's						
	the premises:					
	A fully executed copy of the written lease must be attached or all owners must sign the application.					
13.	3. Attach a listing of the dates and places of all revocations of liquor and non-intoxicatin beer licenses and all convictions of any law or ordinances applicable to the manufactur or sale of intoxicating liquor or non-intoxicating liquor since the ratification of the twenty-first amendment to the Constitution of the United States, if any.					
14.	I affirm that the premises conform to all State laws and City ordinances relating to signs, doors, windows, and related requirements.					
15.	I have read and fully understand the above statements and answers and fully understand all ordinances concerning and relating to the sale of alcoholic beverages.					
16.	Signature of Applicant:					
17.	Signature of Owner of Premises:					
	<u>PARTNERSHIP</u>					
LIST	THE NAMES AND ADDRESSES OF ALL PARTNERS:					

CORPORATION						
PRESIDENT						
Name:	-					
Street Address:	•					
City, State, & Zip Code:	-					
VICE-PRESIDENT						
Name:	-					
Street Address:	-					
City, State, & Zip Code:	-					
SECRETARY						
Name:	-					
Street Address:	-					
City, State, & Zip Code:	-					
ΓREASURER						
Name:	-					
Street Address:	-					
City, State, & Zip Code:	_					

MISCELLANEOUS INFORMATION

A processing fee of fifteen dollars (\$15.00) must accompany this application, payable to the City of Sikeston.

A Criminal Record Check is required. You may either provide it or the city will obtain one for you. If you want the city to process your criminal history, complete the attached Request for a Criminal Record Check. Return it, along with the application and an additional sixteen dollars (\$16.00).

The fee for your liquor license will be one and one-half $(1 \frac{1}{2})$ times the amount charged by the State of Missouri.

Prior to your license being issued, a building inspection by the Community Development Department is required. A business license application/building inspection form can be obtained in the City Collector's Office or at www.sikeston.org.

Once you have obtained your State Liquor License, bring it or a copy, to the City Collectors Office and when your building has passed inspection, your license(s) will be issued.

If you have any questions, contact City Collector Vicky Lewis at 573-471-2193 or via email at collectorsoffice@sikeston.org.

Please note: This application process is for the City of Sikeston ONLY. You must contact the Division of Liquor Control for a State License.

FOR OFFICE USE ONLY

File theday of	20	_, in the office of the City Collector
Signature of city official:		
Title of city official:		
Filing fee received:	By:	
Date Approved:	Ву:	
Date Issued:	By:	
License/Receipt numbers:		

		IISSOURI STATE HIGHWAY PATR ST FOR CRIMINAL RECORE		SHP-158T 08/2			
PLEASE PRIN	T OR TYPE.						
GENERAL II	NFORMATION						
APPLICANT'S LAST	NAME	FIRST	MIDDLE	JR / SR			
MAIDEN/ALIAS LA	ST NAME	FIRST	MIDDLE	JR / SR			
SEX MALE FEMALE	DATE OF BIRTH (MM/DD/YYYY)	SOCIAL SECURITY NUMBER		NDIAN OTHER			
ADDRESS	STREET - P.O. BOX	CITY	STATE	ZIP CODE			
number) or, a fi	ngerprint-based backgroun	based background check (based or d check. When selecting the \$20.00 int card (FD-258). <i>For faster proce</i> machs.mo.gov	Fingerprint Search, this	s form must			
		dob, and / or SSN required. Responsimalled to applicant or the "Send Reply		ıblic records and			
\$2.00 Notary Letter - Notarized letter will state results are "not guaranteed without fingerprints"							
\$20.00 Fingerprint-Based Search. Results will include Missouri records only. Personal Review. Response mailed to the applicant at the address listed above, and will include open and closed records, if any, OR							
\$20.00 Fir	\$20.00 Fingerprint-Based Search. Open / Public Records. Response will be mailed to "Send Reply to" noted below						
☐ \$2.00 Not							

Missouri State Highway Patrol, CJIS Division Post Office Box 9500 Jefferson City, MO 65102-9500

Submit payment by check or money order (NO CASH), payable to "Criminal Record System Fund". Please mail request and

MSHP / CENTRAL REPOSITORY RESPONSE:

SEND REPLY TO (Print or type your mailing label below.) Telephone (include area code) __

appropriate fee to:

fold



fold

Criminal Justice Information Services Division General Information

The Missouri Criminal Records Repository (MCRR) collects, maintains, and disseminates Criminal History Record Information (CHRI) as defined by Sections 43.500 and 589.400, RSMo. CHRI is information collected by criminal justice agencies on individuals and consists of arrests, prosecutions, final dispositions, correctional supervision, and releases. All felony and serious misdemeanor arrests (referred to as reportable arrests), including offender registration information as defined under Section 589.400, RSMo, and all alcohol and drug related traffic offenses are reportable to the MCRR.

Criminal background checks may be requested by means of:

- 1) A **Personal Identifier Search** (name-based) which searches information based on the name, date of birth, and social security number of an individual.
- 2) A **Fingerprint Based Search** which searches the state's criminal history files by conducting a fingerprint comparison of the applicants fingerprints with the criminal (arrest) fingerprints on file with the Central Repository. Fingerprint images are collected and submitted using the standard federal applicant fingerprint card (FD-258).

The Personal Identifier Search requires a payment of \$15.00 per request. The background check results are considered a "possible match" and will include only open records. Any individual, business, or agency may request and receive open record information by means of a personal identifier search. **Open records include:**

- Records containing convictions, such as plead guilty to, or convicted of.
- Arrest information that is less than 30 days old from the date of arrest.
- Charges filed from the prosecutor, awaiting final disposition from the court.
- Records that contain a suspended imposition of sentence (SIS) during the probation period.

A Fingerprint Based Search requires a payment of \$20.00 per request. The results of a fingerprint-based background check are considered a "positive match" and will provide either open records or closed (complete) records as requested by the applicant.

An applicant may choose to conduct a fingerprint based criminal record check containing open records thus limiting the dissemination of criminal history information to **only** open record information. The Criminal Justice Information Services (CJIS) Division will release fingerprint-based criminal history information containing only open record information to any individual, business, or agency when requested by the applicant.

An applicant may choose to conduct a fingerprint-based criminal record check for release of closed records thus allowing dissemination of all criminal history information on file with the Central Repository. Closed records will only be released with a record check submitted by means of a fingerprint comparison and will only be released directly to the applicant or to a qualified entity if authorized in accordance with Section 610.120 and Chapter 43, RSMo. **Closed records include**:

- All criminal history data, including all arrests (filed or not filed charges).
- Charges that have been nolle prossed, dismissed, or found not guilty in a court of law.
- Suspended Imposition of Sentence (SIS) after the probation period is complete.

Notary Letters are provided upon request and require an additional \$2.00 processing fee, per request. A notary letter may be requested with either a personal identifier search or a fingerprint search.

PENALTY — A person who knowingly violates any provision of Sections 43.532, 43.540, 610.100, 610.105, 610.106 or 610.120 RSMo is guilty of a class A misdemeanor.

FBI Record Requests

The FBI only has open files meaning that if someone has the authority to receive the records; they receive all that is on file.

Individuals that need a Federal or Federal Bureau of Investigation (FBI) background check, for personal reasons or for employment purposes for entities not authorized through Missouri State Statute or the Missouri VECHS program, can submit fingerprints with an \$18.00 fee directly to the FBI. For information on how to obtain a federal background check directly from the FBI, please refer to information regarding the FBI's Identity History Summary Check on the FBI's website at www.fbi.gov.