

APPLICATION FOR RETAIL BEER AND LIGHT WINE PERMIT

City of Highland

1662 Hwy. 62/412, Highland, AR 72542

870-856-6199

All Information Must Be Filled Out Before Application Will Be Processed

ANNUAL PERMIT FEE DUE JUNE 30TH

Type of Permit: [] Off Premises Consumption [] On Premises Consumption

Please print or type the following:

Business

Applicant

Name: _____

(Must be person listed on State Permit)

Address: _____

City, State, Zip _____

Phone: _____

Mailing Address: _____

Date of Birth _____

Driver's License #: _____

[] (a) For a retailer whose annual gross sales of beer and/or light wine do not exceed \$1,000.00, the permit fee shall be \$15.00.

[] (b) For a retailer whose annual gross sales of beer and/or light wine exceed \$1,000.00, the permit fee shall be \$15.00 Plus one-half cent for each dollar of gross sales in excess of \$1,000.00. Must provide annual gross sales submitted to the state.

[] (c) The permit fee for a new applicant with no sales history shall be \$40.00.

[] (d) For the purpose of renewing an existing permit, annual sales shall be the actual gross sales for the previous calendar year. If the permittee has not been in operation for a full year at December 31st of the previous year, annual sales shall be Determined by dividing the total actual sales by the number of months of operation and multiplying the result by 12.

[] (e) If a new permit was issued between January 1st and June 30th, the first renewal rate (due on June 30th of the issue year) Shall be \$40.00.

AMOUNT DUE \$ _____

I do hereby swear and affirm that the location of the business for which this permit is sought meets all the requirements of the Alcoholic Beverage Code of the City of Highland and that a current license from the State of Arkansas has been issued.

Affidavit —the below signed applicant, being 21 years of age or older, after first being duly sworn, states that all above information is true and accurate to the best of his or her knowledge and belief.

Applicant's signature _____ (Must be person listed on State Permit)

Subscribed and sworn before me this _____ day of _____, 20 _____

Notary Public

(Seal)

My commission expires _____

A COPY OF YOUR CURRENT STATE PERMIT MUST ACCOMPANY THIS APPLICATION

Gross Alcohol Sales By Month:

July _____

August _____

September _____

October _____

November _____

December _____

January _____

February _____

March _____

April _____

May _____

June _____

Total \$ _____

Transfer this total to line 1 on first page.