

# NEW OR TRANSFER LIQUOR LICENSE OR PERMIT APPLICATION

FOR LIQUOR DIVISION USE ONLY			
Customer #:	_____		
Trf from:	_____		
Reviewer:	Initials	Date	
Agent:	_____	/	/
Chief:	_____	/	/

**To be completed by City/County Clerk**

License Fees

Annual Fee: \$ \_\_\_\_\_

Prorated Fee: \$ \_\_\_\_\_

Transfer Fee: \$ \_\_\_\_\_

Publishing Fee: \$ \_\_\_\_\_

Local License #: \_\_\_\_\_

Date filed with clerk: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Advertising Dates: (2 Weeks) \_\_\_\_\_ & \_\_\_\_\_

Hearing Date: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Publishing Fee Direct Billed to Applicant:

License Term: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_ Through \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Month      Day      Year                                      Month      Day      Year

**LICENSING AUTHORITY:** Begin publishing promptly. As W.S. 12-4-104(d) specifies: **NO LICENSING AUTHORITY SHALL APPROVE OR DENY THE APPLICATION UNTIL THE LIQUOR DIVISION HAS CERTIFIED THE APPLICATION IS COMPLETE.**

Applicant: \_\_\_\_\_

Trade/Business Name (dba): \_\_\_\_\_

Building to be licensed/Building Address: \_\_\_\_\_

Number & Street

City                                      State                                      Zip                                      County

Local Mailing Address: \_\_\_\_\_

Number & Street or P.O. Box

City                                      State                                      Zip

Local Business Telephone Number: (\_\_\_\_) \_\_\_\_\_ Fax Number: (\_\_\_\_) \_\_\_\_\_

Business E-Mail Address: \_\_\_\_\_

<b>FILING FOR</b>	<b>FILING IN (CHOOSE ONLY ONE)</b>	<b>FILING AS (CHOOSE ONLY ONE)</b>
<input type="checkbox"/> NEW LICENSE	<input type="checkbox"/> CITY OF: _____	<input type="checkbox"/> INDIVIDUAL
<input type="checkbox"/> TRANSFER OF LOCATION	<input type="checkbox"/> COUNTY OF: _____	<input type="checkbox"/> PARTNERSHIP
<input type="checkbox"/> TRANSFER OWNERSHIP	<input type="checkbox"/> ASSIGNMENT LETTER ATTACHED	<input type="checkbox"/> LP/LLP
FORMERLY HELD BY: _____		<input type="checkbox"/> LLC
		<input type="checkbox"/> CORPORATION
		<input type="checkbox"/> LTD PARTNERSHIP
		<input type="checkbox"/> ORGANIZATION
		<input type="checkbox"/> OTHER _____

**TYPE OF LICENSE OR PERMIT (CHOOSE ONLY ONE)**

<b>RETAIL LIQUOR LICENSE</b>	<b>RESTAURANT LIQUOR LICENSE</b>	<b>MICROBREWERY</b>
<input type="checkbox"/> ON-PREMISE ONLY (BAR)	<input type="checkbox"/> RESTAURANT LIQUOR LICENSE	<input type="checkbox"/> WINERY
<input type="checkbox"/> OFF-PREMISE ONLY (PACKAGE STORE)	<input type="checkbox"/> RESORT LIQUOR LICENSE	<input type="checkbox"/> DISTILLERY SATELLITE
<input type="checkbox"/> COMBINATION ON/OFF PREMISE (BOTH BAR & PACKAGE STORE)	<input type="checkbox"/> BAR AND GRILL	<input type="checkbox"/> WINERY SATELLITE
	<b>LIMITED RETAIL (CLUB)</b>	<input type="checkbox"/> COUNTY RETAIL/SPECIAL MALT BEVERAGE PERMIT
	<input type="checkbox"/> VETERANS CLUB	
	<input type="checkbox"/> FRATERNAL CLUB	
	<input type="checkbox"/> GOLF CLUB	
	<input type="checkbox"/> SOCIAL CLUB	

**SPECIAL DESIGNATIONS**

CONVENTION FACILITY                                       GOLF CLUB                                       RESORT

CIVIC CENTER/EVENT CENTER/ PUBLIC AUDITORIUM                                       GUEST RANCH

To Assist the Liquor Division with scheduling inspections: **OPERATIONAL STATUS**

FULL TIME (e.g. Jan through Dec) (specify months of operation) from \_\_\_\_\_ to \_\_\_\_\_

SEASONAL/PART-TIME DAYS OF WEEK (e.g. Mon through Sat) from \_\_\_\_\_ to \_\_\_\_\_

NON-OPERATIONAL/PARKED HOURS OF OPERATION (e.g. 10a - 2a) from \_\_\_\_\_ to \_\_\_\_\_

**ALL APPLICANTS MUST COMPLETE QUESTIONS 1- 4**

**1. BUILDING OWNERSHIP:** Does the applicant? W.S. 12-4-103(a)(iii)

- (a) **OWN** the licensed building?  YES (own)
- (b) **LEASE** the licensed building? (Lease must be through the term of the liquor license)  YES (lease)

If Yes, please submit a copy of the lease and indicate:

- (i) When the lease expires, located on page \_\_\_\_\_ paragraph \_\_\_\_\_ of lease.
- (ii) Where the **Sales** provision for alcoholic or malt beverages is located, on page \_\_\_\_\_ paragraph \_\_\_\_\_ of lease.  
(MUST contain a provision for SALE OF ALCOHOLIC or MALT BEVERAGES.)

**2.** To operate your liquor business, have you assigned, leased, transferred or contracted with any other person (entity) to operate and assert total or partial control of the license and the licensed building? W.S. 12-4-601(b)  YES  NO

**3.** Does any manufacturer, brewer, rectifier, wholesaler, or through a subsidiary affiliate, officer, director or member of any such firm: W.S. 12-5-401, 12-5-402, 12-5-403

- (a) Hold any interest in the license applied for?  YES  NO
- (b) Furnish by way of loan or any other money or financial assistance for purposes hereof in your business?  YES  NO
- (c) Furnish, give, rent or loan any equipment, fixtures, interior decorations or signs other than standard brewery or manufacturer's signs?  YES  NO
- (d) If you answered **YES** to any of the above, explain fully and submit any documents in connection there within:  
\_\_\_\_\_

**4.** Does the **applicant** have any interest or intent to acquire an interest in any other liquor license issued by **this** licensing authority? W.S. 12-4-103(b)  YES  NO  
If "YES", explain: \_\_\_\_\_

**5. BAR AND GRILL LICENSE OR RESTAURANT LICENSE:**

Have you submitted a valid food service permit or application? W.S. 12-4-413(a)  YES  NO

**6. RESORT LICENSE:**

Does the resort complex:

- (a) Have an actual valuation of at least one million dollars, or have you committed or expended at least one million dollars (\$1,000,000.00) on the complex, excluding the value of the land? W.S. 12-4-401(b)(i)  YES  NO
- (b) Include a restaurant and a convention facility which will seat at least one hundred (100) persons? W.S. 12-4-401(b)(ii)  YES  NO
- (c) Include motel, hotel or privately owned condominium, town house or home accommodations approved for short term occupancy with at least one hundred (100) sleeping rooms? W.S. 12-4-401(b)(iii)  YES  NO
- (d) If no on question (c), have a ski resort facility open to the general public in which you have committed or expended not less than 10 million dollars (\$10,000,000.00)? W.S. 12-4-401(b)(iv)  YES  NO
- (e) Are you contracting/leasing the food and beverage services? W.S. 12-4-403(b)
  - 1. If Yes, have you submitted a copy of the food and beverage contract/lease?  YES  NO

**7. MICROBREWERY LICENSE:**

Will the license be held in conjunction with another liquor license? W.S. 12-4-412(b)(iii)  YES  NO

- (a) If "YES", please specify type:  RETAIL  RESTAURANT  RESORT  
 BAR AND GRILL  WINERY

(b) Do you self distribute your products? W.S. 12-2-201(a)  YES  NO  
(Requires wholesale malt beverage license with the Liquor Division)

**8. WINERY LICENSE:**

Will the license be held in conjunction with another liquor license? W.S. 12-4-412(b)(iii)  YES  NO

- (a) If "YES", please specify type:  RETAIL  RESTAURANT  RESORT  
 BAR AND GRILL  MICROBREWERY

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**9. LIMITED RETAIL (CLUB) LICENSE:**

**FRATERNAL CLUBS** W.S. 12-1-101(a)(iii)(B)

- (a) Has the fraternal organization been actively operating in at least thirty-six (36) states?  YES  NO
- (b) Has the fraternal organization been actively in existence for at least twenty (20) years?  YES  NO

**10. LIMITED RETAIL (CLUB) LICENSE:**

**VETERANS CLUBS** W.S. 12-1-101(a)(iii)(A):

- (a) Does the Veteran's organization hold a charter by the Congress of the United States?  YES  NO
- (b) Is the membership of the Veteran's organization comprised only of Veterans and its duly organized auxiliary?  YES  NO

**11. LIMITED RETAIL (CLUB) LICENSE:**

**GOLF CLUBS** W.S. 12-1-101(a)(iii)(D)/W.S. 12-4-301(e):

- (a) Do you have more than fifty (50) bona fide members?  YES  NO
- (b) Do you own, maintain, or operate a bona fide golf course together with clubhouse?  YES  NO
- (c) Are you a political subdivision of the state that owns, maintains, or operates a golf course?  YES  NO
  - 1. Are you contracting/leasing the food and beverage services? W.S. 12-5-201(g)  YES  NO
  - 2. If Yes, have you submitted a copy of the food and beverage contract/lease?  YES  NO

**12. LIMITED RETAIL (CLUB) LICENSE:**

**SOCIAL CLUBS** W.S. 12-1-101(a)(iii)(E)/W.S. 12-4-301(b):

- (a) Do you have more than one hundred (100) bona fide members who are residents of the county in which the club is located?  YES  NO
- (b) Is the club incorporated and operating solely as a nonprofit organization under the laws of this state?  YES  NO
- (c) Is the club qualified as a tax exempt organization under the Internal Revenue Service?  YES  NO
- (d) Has the club been in continuous operation for a period of not less than one (1) year?  YES  NO
- (e) Has the club received twenty-five dollars (\$25.00) from each bona fide member as Recorded by the secretary of the club and are club members at the time of this application in good standing by having paid at least one (1) full year in dues?  YES  NO
- (f) Does the club hold quarterly meetings and have an actively engaged membership carrying out the objectives of the club?  YES  NO
- (g) Have you filed a true copy of your bylaws with this application?  YES  NO
- (h) Has at least fifty one percent (51%) of the membership signed a petition indicating a desire to secure a Limited Retail Liquor License? (Petition Attached)  YES  NO

**13. If applicant is filing as an Individual, Partnership or Club: W.S. 12-4-102(a)(ii) & (iii)**

Each individual, partner or club officer must complete the box below.

True and Correct Name	Date of Birth	Residence Address No. & Street City, State & Zip <i>DO NOT LIST PO BOXES</i>	Residence Phone Number	Have you been a DOMICILED resident for at least 1 year and not claimed residence in any other state in the last year?	Have you been Convicted of a Felony Violation?	Have you been Convicted of a Violation Relating to Alcoholic Liquor or Malt Beverages?
				YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
				YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
				YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
				YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
				YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
				YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>

(If more information is required, list on a separate piece of paper and attach to this application.)

**14. If the applicant is a Corporation, Limited Liability Company, Limited Liability Partnership or Limited Partnership: W.S. 12-4-102(a)(iv) & (v)**

Each stockholder holding, either jointly or severally, ten percent (10%) or more of the outstanding and issued capital stock of the corporation, limited liability company, limited liability partnership, or limited partnership, **and every officer, and every director** must complete the box below.

True and Correct Name	Date of Birth	Residence Address No. & Street City, State & Zip <b>DO NOT LIST PO BOXES</b>	Residence Phone Number	No. of Years in Corp or LLC	% of Corpora te Stock Held	Have you been Convicted of a Felony Violation?	Have you been Convicted of a Violation Relating to Alcoholic Liquor or Malt Beverages?
						YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
						YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
						YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
						YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
						YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>
						YES <input type="checkbox"/> NO <input type="checkbox"/>	YES <input type="checkbox"/> NO <input type="checkbox"/>

(If more information is required, list on a separate piece of paper and attach to this application)

**REQUIRED ATTACHMENTS:**

- A statement indicating the financial condition and financial stability of the applicant W.S. 12-4-102(a)(vi).
- Attach any lease agreements (especially for resort/political subdivisions leasing out food & beverage services) W.S. 12-4-103 (a)(iii)/W.S. 12-4-403(b)/W.S. 12-4-301(e).
- If transferring a license from one ownership to another, a form of assignment from the current licensee to the new applicant authorizing the transfer W.S. 12-4-601(b).

**OATH OR VERIFICATION**

(Requires signatures by **ALL** Individuals, **ALL** Partners, **ONE (1)** LLC Member, or **TWO (2)** Corporate Officers or Directors except that if all the stock of the corporation is owned by **ONE (1)** individual then that individual may sign and verify the application upon his oath, or **TWO (2)** Club Officers.) W.S. 12-4-102(b)

*Under penalty of perjury, and the possible revocation or cancellation of the license,  
I swear the above stated facts, are true and accurate.*

STATE OF WYOMING )  
 ) SS.  
COUNTY OF \_\_\_\_\_ )

Signed and sworn to before me on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ that the facts alleged in the foregoing instrument are true by the following:

- |    |             |                |       |
|----|-------------|----------------|-------|
| 1) | _____       | _____          | _____ |
|    | (Signature) | (Printed Name) | Title |
| 2) | _____       | _____          | _____ |
|    | (Signature) | (Printed Name) | Title |
| 3) | _____       | _____          | _____ |
|    | (Signature) | (Printed Name) | Title |
| 4) | _____       | _____          | _____ |
|    | (Signature) | (Printed Name) | Title |
| 5) | _____       | _____          | _____ |
|    | (Signature) | (Printed Name) | Title |
| 6) | _____       | _____          | _____ |
|    | (Signature) | (Printed Name) | Title |

Witness my hand and official seal:

\_\_\_\_\_  
Signature of Notary Public

(2/21)  
(SEAL)

My commission expires: \_\_\_\_\_



## CITY CLERK DEPARTMENT

### Division of City Clerk

2101 O'Neil Avenue, Room 101

(307) 637-6346

[www.cheyennecity.org](http://www.cheyennecity.org)

### TO: NEW LIQUOR LICENSE APPLICANTS

The following items are required by the City Clerk in order to process a liquor license application:

- \_\_\_\_\_ One complete liquor license application with original signatures signed before a notary public. The Liquor Division requires two or more officers or directors sign and verify the application, unless stated otherwise (i.e. If there is only one shareholder and no directors/officers in a corporation, then that one individual may sign and verify the application).
- \_\_\_\_\_ Financial statement (must be in applicant's name(s)) indicating the financial condition and stability of the applicant.
- \_\_\_\_\_ Property lease agreement, if applicable; if property is being purchased, written documentation of intent to purchase. The agreement/documentation must contain approval that alcoholic or malt beverages may be sold on the premises. Lease should extend through yearly licensed period of April 1 through March 31.
- \_\_\_\_\_ Suitable floor plan of the premises to be licensed (Submit plan in no larger than 11"x 17" format)
  - \_\_\_\_\_ If the application is for a restaurant liquor license, a physical description of the proposed dispensing area(s) must also be provided (example: Dispensing area located in southwest corner of the building, approximately 10'x20')
  - \_\_\_\_\_ If alcohol services will involve a package store and/or drive-up environment, a physical description of the proposed dispensing/sales room must also be provided.
- \_\_\_\_\_ If applying for a restaurant or bar and grill liquor license, a copy of current and valid State of Wyoming Food Service Permit or proof of application filing prior to issuance of license. This is available through City/County Environmental Health Unit, 100 Central Ave., Cheyenne, WY.
- \_\_\_\_\_ If applying for a restaurant or bar & grill liquor license, please provide a menu.
- \_\_\_\_\_ A cover letter of introduction addressed to the Mayor and members of City Council (2101 O'Neil Avenue, Cheyenne, WY 82001).
- \_\_\_\_\_ Affidavit/Authorization signed by all officers, directors, and any shareholders holding 10% or more (either jointly or severally) of the outstanding and issued capitol stock, as well as those filing as an individual.
- \_\_\_\_\_ If filing as a corporation, limited liability company, limited liability partnership or limited partnership, proof of filing to do business in Wyoming from Secretary of State's Office.
- \_\_\_\_\_ Written information on proposed alcohol training program pursuant to City Code Chapter 5.12 requirements

\_\_\_\_\_ Payment of Notice of Application and Public Hearing publication fee in the amount of \$100.00 (checks should be payable to Cheyenne City Treasurer) (license application fee and publication fee may be made as one payment).

\_\_\_\_\_ Payment of application fee (checks should be payable to Cheyenne City Treasurer).

- Resort Liquor License	\$ 1,500.00
- Retail Liquor License	\$ 1,500.00
- Bar and Grill Liquor License	\$10,500.00
- Restaurant Liquor License	\$ 1,050.00
- Limited Retail Liquor License	\$ 625.00
- Microbrewery or Winery Permit	\$ 500.00*
- Satellite Winery Permit	\$ 100.00
- Satellite Manufacturer's Permit	\$ 100.00
- Special Malt Beverage Permit	\$ 1,500.00
- Transfer of Ownership/Location	\$ 100.00**

\*When dual holding of a microbrewery or winery permit with a retail, restaurant, resort or bar and grill liquor license exists, no additional fee other than the retail, restaurant, resort of bar and grill license fee is assessed.

\*\* Transfer of ownership and/or location for certain types of licenses and permits is not allowed.

**NOTE: IF APPLICANT IS REQUESTING A TRANSFER OF OWNERSHIP OR LOCATION OF A CURRENT LICENSE, THE FOLLOWING IS ALSO REQUIRED:**

\_\_\_\_\_ Proof of any liens, UCC filings or other documents reflecting any security interest in the license.

\_\_\_\_\_ Letter from current license holder requesting transfer approval from governing body and reason for request.

\_\_\_\_\_ Please be aware if you are requesting a transfer of ownership and you plan to change the trade name of the business, you may need to meet compliance requirements of the City Sign Ordinance. You will need to check with the Development/Zoning office at 637-6282.

**ZONING REQUIREMENTS:**

\_\_\_\_\_ If you are adding a liquor sales/service operation (or, if applicable, an additional dispensing room) to an existing building there may be zoning requirements that need to be addressed. Please check with the Development/Zoning office at 637-6282.

\_\_\_\_\_ If you are applying for a microbrewery or winery permit or satellite manufacturer's permit and will be manufacturing the product on the premises, there are more specific zoning requirements that may be involved. Please check with the Development/Zoning office at 637-6282, Environmental Health at 633-4087 and the Wyoming Liquor Division at 777-7231.

Once the application and all supporting documentation have been received and reviewed, a legal notice will be published in a newspaper of local circulation once a week for two consecutive weeks. The City Clerk's office will notify the applicant when the public hearing, committee meeting, and City Council meeting will be held. Inspections by various City/County offices will be scheduled through the City Clerk prior to issuance of a new or transferred license.

Approval of liquor applications require a majority vote by those members of the governing body present at official City Council meetings. The City Clerk will provide staff reports at Council Committee meetings but it is the applicant's responsibility, or representative, to attend applicable meetings and provide information affiliated with their application.