

APPLICATION FOR WHOLESALE LIQUOR PERMIT
City of Fayetteville, 113 West Mountain, Fayetteville, AR 72701
Regulated by Title XI, Chapter 111 of the City of Fayetteville Code of Ordinances

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: _____

****ALL INFORMATION MUST BE FILLED OUT***

Driver's License #: _____

BEFORE APPLICATION WILL BE PROCESSED.

Permit period _____ to _____

Permit fee (enclose check payable to City of Fayetteville) \$500.00

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

Affidavit – The below signed wholesale dealer, after first being duly sworn, states that all above information is true and accurate to the best of his or her knowledge and belief.

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

APPLICATION FOR WHOLESALE BEER AND LIGHT WINE PERMIT

City of Fayetteville, 113 West Mountain, Fayetteville, AR 72701

Regulated by Title XI, Chapter 111 of the City of Fayetteville Code of Ordinances

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: _____

****ALL INFORMATION MUST BE FILLED OUT***

Driver's License #: _____

BEFORE APPLICATION WILL BE PROCESSED.

Permit fee (enclose check payable to City of Fayetteville)

\$125.00

Required report of beer and light wine sales to each retailer within the City:

_____ Attached

_____ Furnished to City on _____
(Date)

Affidavit – The below signed wholesale dealer, 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