



CITY OF LEE'S SUMMIT

LIQUOR LICENSE APPLICATION PROCESS

General Information: (Please keep this information for your records)

- Completed applications are to be returned to Administration at the Lee's Summit Police Department, 10 NE Tudor Rd., Lee's Summit, MO 64086. Please call Joshua Ward at 816-969-1747 (or e-mail joshua.ward@cityofls.net) with any questions regarding liquor license applications or the Lee's Summit Alcoholic Beverages Ordinance. Please call to make an appointment for liquor license matters.
- Any reference to "applicant" on the applications refers to the owner and/or managing officer. The person who completes and signs the application shall have it notarized. Notary service is available free of charge for liquor license applications at the Lee's Summit Police Department.
- Print legibly or type answers on liquor license applications. Use additional sheets, if necessary.
- For newly constructed or remodeled businesses, a certificate of occupancy permit shall be obtained *prior* to the actual issuance of a city liquor license. To obtain this permit, contact Codes Administration at 816-969-1200. For zoning approval, contact Planning and Development at 816-969-1600. For business licenses, contact the Treasury Department at 816-969-1139.
- Fingerprints may be obtained at the Lee's Summit Police Department. The applicant and managing officer, if different, as well as all officers, directors, and any shareholder holding more than a ten percent (10%) interest in the business shall be fingerprinted.
- The Lee's Summit City Council meets in Regular Session two times a month. You must submit your application to the Police Department two weeks prior to the Council meeting where the license will be presented for vote. All applications will be forwarded to the City Clerk for City Council approval.
- After City Council approval, all further business transactions will be conducted at City Hall, 200 SE Green Street, Lee's Summit, MO 64063. A Letter of Approval and Liquor License can be picked up at the City Hall Clerk's Office (816-969-1005) the day after City Council approval. Otherwise, they will be mailed to your business. Please contact the Missouri Department of Public Safety-Alcohol and Tobacco control (816-743-8888) at 8800 E. 63rd Street, Raytown, MO 64133 for information on obtaining your MO State Liquor license.
- **No alcohol sales will be allowed until a valid City Liquor License is issued.**

Open Sept. / 2019

\$625.00



CITY OF LEE'S SUMMIT, MISSOURI
APPLICATION FOR BUSINESS LIQUOR LICENSE

Please mark ("x") which one of the following licenses you will need for a Lee's Summit, Missouri establishment. Sunday licenses are a separate application.

- A1 - Manufacturing, brewing malt liquor (\$300.00)
- A3 - Wholesale selling of malt liquor (\$75.00)
- B1 - Manufacturing 22% or less alcohol content intoxicating liquor (\$150.00)
- B2 - Manufacturing, distilling, blending intoxicating liquor of all kinds (\$300.00)
- B3 - Wholesale selling of 22% or less alcohol-content intoxicating liquor (\$150.00)
- B4 - Wholesale selling of intoxicating liquor of all kinds (\$375.00)
- C1 - General retail selling of malt liquors, or wine, or both, by the drink **and** in the original package (\$52.50)
- C2 - Hotel retail selling of malt liquor by the drink and in the original package \$52.50
- C3 - Restaurant retail selling of malt liquor by the drink **and also** in the original package, **including Sunday sales** (\$75.00)
- D - Retail selling of malt liquor only in the original package, **including Sunday** (22.50)
- G1 - General retail selling of intoxicating liquor of all kinds by the drink **and** in the original package (\$450.00)
- G2 - Hotel retail selling of intoxicating liquor of all kinds by the drink **and also** in the original package (\$450.00)
- G3 - Restaurant retail selling of intoxicating liquor of all kinds by the drink **and** in the original package (\$450.00)
- H - Retail selling of intoxicating liquor of all kinds only in the original package (\$150.00)
- I - **Consuming** intoxicating liquor on premises not licensed to sell (C.O.L.) (\$90.00)
- J - Resort retail selling of intoxicating liquor by the drink (\$450.00)
- J (temp) - Resort temporary retail selling of intoxicating liquor by the drink (\$75.00 in addition to Type J)
- M - Caterer temporary location (7-day) for retail selling of intoxicating liquor by the drink (\$15.00/day)
- N - Caterer temporary location (50-day) for retail selling of intoxicating liquor by the drink (\$500.00)
- O - Caterer temporary location (unlimited) for retail selling of intoxicating liquor by the drink (\$1,000.00)
- P - Fourth of July temporary 7-day selling of wine and malt liquor by the drink (church, school, etc.) (\$150.00)
- Q - Temporary (7-day) picnic retail selling of intoxicating malt liquor by the drink (church, school, etc.) (\$15.00/day)
- R - Temporary (7-day) picnic retail selling of intoxicating liquor by the drink (\$37.50/day)
- S - **Sunday** license retail selling intoxicating liquor of all kinds (\$300.00 in addition to specific type)
- Tasting - yearly fee in addition to specific type (\$25.00)

(Any reference to "Applicant" in this document refers to the Owner/Managing Officer.)

To be completed by applicant as (check one):

Sole Owner & Operator

Corporation

Partnership

LLC

Corporation/LLC Name: BEHA'S ITALIAN RESTAURANT INC

Business Name: BEHA'S ITALIAN RESTAURAN Phone: 817 703 8790

Business Address: 511 SE MELODY LN Lee's Summit, MO 64063

(I), (We), the undersigned, hereby apply to the City of Lee's Summit, MO, for the following described license:

Type _____ for the premises described above.

Applicant's Name: KURT PYCIOR

Phone: 816-564-7791

Home Address: 5019 QUEEN RIDGE AVE

Place of Birth: _____ Date of Birth: _____

Place of Employment (other than business): BAIRD REALTY GRP.

Employment Address: 304 SE 2ND ST. LSMO 64063 Phone: 816-527-1923

1. List all previous addresses, if less than five years at current address: _____

1014 SW ELWOOD DR. LSMO 64063

1786 SW SUMMIT VALLEY DR. LSMO 64063

2. Are you a citizen of the United States of America? YES If naturalized, give date and place of naturalization: _____

3. Will you be the person in active control and/or management (managing officer) of this business full-time? YES. If not, give complete details on the planned management and persons involved. _____

4. Have you or any person employed by you ever held any type of liquor license issued by the City of Lee's Summit or by the licensing authority of any state, county or city? NO YES

Provide details: MOTO'S, Paddy O'Quigleys (MISO)

5. Has any such license listed in question #4 ever been suspended or revoked? NO If so, please give complete details: _____
6. Have you ever made application for a liquor license that was denied by the City of Lee's Summit or by the licensing authority of any state, county or city? _____ If so, please give complete details: NO
7. Have you or anyone interested either directly or indirectly in the premises to be licensed hereunder or the operation thereon ever been convicted of a felony? NO If so, please give complete details: _____
8. If not a corporation/LLC, give names and business addresses of employers for the past five years. (If self-employed, state nature of business and location.): NO
9. Is the proposed location within 300 feet of a church or school? NO
10. If existing business, from whom and when was the business purchased? NO
- Effective date of possession: _____. Name of mortgage holder, if any: _____
11. Will any distiller, wholesaler, wine maker, brewer, or supplier, or coin operated, commercial, manual or mechanical amusement devices or the employees, officers or agents thereof, have any financial interest in the retail business of the applicant for the sale of alcoholic beverages, or "C.O.L.", and will the applicant directly or indirectly borrow or accept from any such persons equipment, money, credit, or property of any kind except ordinary commercial credit for liquor sold? ~~NO~~ YES If so, please explain: MAYBE BEER/WINE SIGNS OR BANNER FOR SPECIALS
12. Will applicant either directly or indirectly borrow or accept from any person identified in #11 either equipment, money, credit or property of any kind except ordinary commercial credit for liquor sold? NO If so, please explain: NO

13. Will you at all times permit the entry of any officer or investigator who may have legal supervisory authority for the purpose of inspection or search; and will you permit the removal of all things and articles which may be in violation of the ordinances of Lee's Summit, Missouri, and the laws of the State of Missouri; and do you promise and agree not to violate any of the ordinances of Lee's Summit, Missouri, the laws of the State of Missouri, or the United States in the conduct of the business for which the license is sought? YES

IF BUSINESS IS OWNED BY A CORPORATION, COMPLETE THIS SECTION:

Name of corporation/LLC: BEHAS ITALIAN RESTAURANT INC
State in which incorporated: MO Date of incorporation: 8/01/2019
If not a Missouri corporation/LLC, date authorized to do business in Missouri: _____

Full name, complete residential address, date of birth and Social Security Number of the President, Vice President, Treasurer and Secretary of the corporation (or Members of the LLC): ADHURIM VELIU
621 ALA DR FORT WORTH TX 76108

If stock is not publicly held, give names and residential addresses of all stockholders who hold 10% or more of the capital stock: ADHURIM VELIU 621 ALA DR FORT WORTH TX 76108

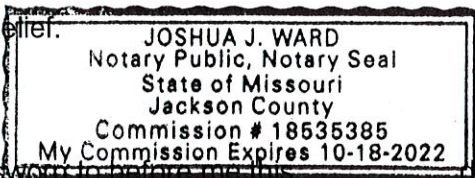
(County of Jackson)

ss

(State of Missouri)

I, KURT PYCIOR, being of lawful age and duly sworn upon my oath,
(Print Applicant's Name)

do swear that the answers and information given in this application are true and complete to the best of my knowledge and belief.



Subscribed and sworn to before me this 19th day of August, 2019

[Signature]
Applicant's Signature

[Signature]
Notary Public

My commission expires: 10-18-2022

To Be Provided By Applicant:

1) The Applicant and/or Managing Officer (if different) shall provide:

- ✓ (a) Recent photograph; - MO ID
- ✗ (b) Copy of Missouri voter registration card; -
- ✗ (c) Copy of paid Missouri personal property tax receipt for year immediately preceding date of application
- ✓ (d) Fingerprints (obtained at the Lee's Summit Police Department, Main Lobby, 10 NE Tudor Rd., Lee's Summit, MO). The Applicant and/or Managing Officer (if different) will be fingerprinted as will all officers, directors and any shareholder holding more than a ten percent (10%) interest in the business.

2) **Copy of Business License** (contact Treasury Department at 816-969-1139).

3) **Copy of Zoning Approval** (contact Planning & Development at 816-969-1600).

4) If existing business location:

- ✗ (a) Copy of lease or mortgage showing Proof of Occupancy.
- ✓ (b) Recent photographs of the interior and exterior of the premises to be licensed.

✗ **For newly constructed or remodeled businesses:**

✗ Certificate of Occupancy Permit shall be obtained prior to the actual issuance of a city liquor license (contact Codes Administration at 816-969-1200).

✗ Complete description of the plans, specifications, and fixtures of the proposed place of business.

✗ **Package Liquor Only:** Inventory Affidavit, notarized by the applicant, stating the type of business presently engaged in, or in conjunction with, which the license shall be used; **AND** stating that in his place of business the applicant has, and at all times keeps, a stock of goods having an invoice of at least \$1,000, exclusive of fixtures and intoxicating liquors.

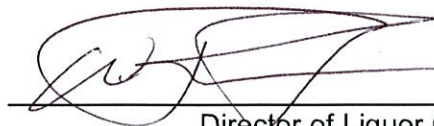
7) **Appropriate license fee:** Make checks and money orders payable to the City of Lee's Summit.

8) **Estimated date of opening?** ASAP

For Office Use Only:

It is recommended this application be ~~DISAPPROVED~~ APPROVED this 23rd day of

September, 2019.



Director of Liquor Control

City Council Action: Approved Disapproved Date: _____



APPLICATION FOR LIQUOR LICENSE
TYPE "S" - SUNDAY RETAIL (\$300)

The following is to be completed by the owner or managing officer:

Sole Owner & Operator

Corporation

Partnership

Applicant's Name: KURT PYCIOR

Business Name: BEHA'S ITALIAN RESTAURANT Phone: 817 703 8740

Business Address: 511 SE MELODY LN Lee's Summit, MO

I, the undersigned, hereby make application to the City of Lee's Summit, Missouri, for a Type "S" liquor license in accordance with Chapter 4, "Alcoholic Beverages" Ordinance of the City of Lee's Summit, Missouri.

County of Jackson)

SS

State of Missouri)

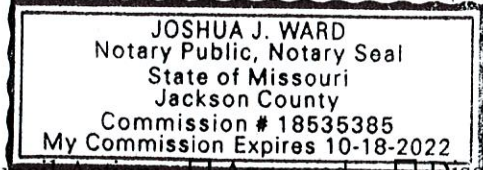
I, (please print) KURT PYCIOR, being of lawful age and duly sworn upon my oath, do swear that the answers and information given in this application are true and complete to the best of my knowledge and belief.

[Signature]
 Applicant's Signature

Subscribed and sworn to before me this 19th day of August 2019
 My commission expires: 10-18-2022

[Signature]
 Notary Public

It is recommended this application be APPROVED / ~~DISAPPROVED~~ this 23rd day of September, 2019.



[Signature]
 Director of Liquor Control

City Council Action: Approved Disapproved

Date: _____