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To Be Provided By Applicant:

1)	The Applicant and/or Managing Officer (if different) shall provide:
	a) Recent photograph; /
	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. Wrised - on file
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 of mortgage showing Proof of Occupancy.
	b) Recent photographs of the interior and exterior of the premises to be licensed.
5)	For newly constructed or remodeled businesses:
	a) Certificate of Occupancy Permit shall be obtained prior to the actual issuance of a city liquor
	license (contact Codes Administration at 816-969-1200).
	b) Complete description of the plans, specifications, and fixtures of the proposed place of
	business.
6)	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?
υ,	Estimated date of opening?
For	Office Use Only:
It is	recommended this application be APPROVED DISAPPROVED this day of
	March ,2017.
	Che F
	Director of Liquor Control
0.17	Occurs the Author to Table 19 and 19
-	Council Action: Approved Disapproved Date:
	7 OTON 1000 1001 (100 100)



APPLICATION FOR LIQUOR LICENSE TYPE "8" - SUNDAY RETAIL (\$300)

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

Sole Owner &	Operator	Corporation-	Partnership	
Applicant's Name:	DOMENALL	molley Los	3-mn. 7 /	11500 LCL 16-29F-3289 64064
Business Name:	LAKEN-00	Pab	Phone: 8	6-295-3289
Business Address:	811 N.C.	LAKENDOD L	ee's Summit, MO	64064
		to the City of Lee's Su everages" Ordinance of		رکر a Type "S" liquor license mmit, Missouri.
County of Jackson)				
State of Missouri)	SS			
I, (please print my oath, do swear tha my knowledge and be		- Aus	, being of lawful application are true an	ge and duly sworn upor d complete to the best of
My commission expir	CHARD TODD BRYANT ary Public - Notary Seal I Missouri, Jackson County mmission # 15544717 nission Expires Jul 21, 2019	day of	Notary Public ED this 6 th	
	,	Direct	or of Liquor Control	
City Council Action:	☐ Approved ☐ Di	sapproved Date:		
LSPD FORM #446 (New, 08/91	, Revised 03/00, 09/12)			

THIS OFFICIAL RECEIPT
ISSUED BY
LEE'S SUMMIT POLICE DEPARTMENT
10 N.E. TUDOR ROAD
LEE'S SUMMIT, MO 64086
TELEPHONE 816-969-1715

RECEIVED FROM

CASE NO.

PAYMENT FOR

REC'D BY

RECEIPT NOS

AMOUNT

130981