

Please mark ("x") which <u>one</u> of the following licenses you will need for a Lee's

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Summit, Missouri establishment. Sunday licenses are a separate application.

		A1 -	Manufacturing, brewing malt liquor (\$300.00)
		A2 -	Manufacturing, brewing non-intoxicating beer (\$375.00)
		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)
		В3 -	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 <u>and</u> in the original package (\$52.50)
		C2 -	Hotel retail seiling of mait liquor by the drink and in the original package (\$52.50)
		C3 -	Restaurant retail selling of malt liquor by the drink and 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 <u>and</u> in the original package (\$450.00)
		G2 -	Hotel retail selling of intoxicating liquor of all kinds by the drink <u>and</u> in the original package (\$450.00)
	<u>X</u>	G3 -	Restaurant retail selling of intoxicating liquor of all kinds by the drink <u>and</u> in the original package (\$450.00)
		Н-	Retail selling of intoxicating liquor of all kinds only in the original package (\$150.00);
		1-	Consuming intoxicating liquor on premises not licensed to seli (C.O.L.) (\$90.00)
		J-	Resort retail selling of intoxicating liquor by the drink. (\$450.00)
		: .	
	<u>X</u>	s-	Sunday license (\$300.00)

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

	Sole Owner & Operator Corporation Corporation	PartnershipLLC X
Corp	oration/LLC Name: H2B RESTAURANTS LLC	
-	ness Name:BIG WHISKEYS AMERICAN RESTAURA	NT & BAR Phone: 816-347-1881
	ness Address: 860 NW BLUE PARKWAY SUITE W	
		EGG G GATTATING WITE
(I), (Ne), the undersigned, hereby apply to the City of Lee's S	Summit, MO, for the following described license:
Туре	G3, S for the premises described above.	
	IEDDY D HOUGE	
Appli	cant's Name: JERRY D HOUSE	Phone:
	e Address:	
Place	e of Birth:	Date of Birth:
	e of Employment (other than business):	
Emp	oyment Address:	Phone:
1.	List all previous addresses, if less than five years at cur	rent address:
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2.	Are you a citizen of the United States of America? YE	If naturalized, give date and place of
1.11	naturalization:	
3.	Will you be the person in active control and/or manage	gement (managing officer) of this business full-
	time? YES If not, give complete details on the	
i	State of the state	
4.	Have you or any person employed by you ever held a	any type of liquor license issued by the City of
	Lee's Summit or by the licensing authority of any state,	
	alotoilo.	, and a second s
5.	Has any auch license listed in superties #4 ever hear	augnonded as seveleda NO
J.	Has any such license listed in question #4 ever been	<u> </u>
	give complete details:	

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: _____Date of incorporation:____ State in which incorporated: 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:____ If stock is not publicly held, give names and residential addresses of all stockholders who hold 10% or more of the canital stock:.... County of Jackson) State of Missouri) _____, being of lawful age and dulysworn 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. Notary Public, Notary Seal Subscribed and swam to before me this Johnson County
Commission # 15635199
My Commission Expires May 03, 2019 My commission expires:

State of Missouri; and do you promise and agree not to violate any of the ordinances of Lee's Summit,

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 a
	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).
	Copy of Zoning Approval (contact Planning & Development at 816-969-1600).
	If existing business location:
•	a) Copy of lease or mortgage showing Proof of Occupancy.
et i rabil	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.
 3)	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.
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3):	Estimated date of opening?

) Estimated date of open	ing?			
or Office Use Only:				
t is recommended this applic	cation be APPROVE	D / DISAPPROV	ED this 2-2	_ day of
Man	,2018.			
			RET	
	en e		Director of Liquor Co	ntrol
City Council Action:	proved Disapp	roved Date:		• •



The following is to be completed by the owner or managing officer:						
Sole Owner & Operator	Corporation	Partnership 🛛				
Applicant's Name: JERRY D HOUSE			dia .			
Business Name: BIG WHISKEYS AMER	RICAN RESTAURA	NT & BAR Phone: 816-347-18	<u>38</u> 1			
Business Address: 860 NW BLUE PARK	KWAY SUITE W	Lee's Summit, MO 64086	 .			
I, the undersigned, hereby make applicati in accordance with Chapter 4, "Alcoholic	***	•				
	e ye a fe					
County of Jackson)						
State of Missouri)						
I, (please print) ERY my oath, do swear that the answers and in my knowledge and belief.		, being of lawful age and his application are true and comp				
Subscribed and sworn to before me this My Commission Expires: EtyANE LYNCH Notary Public, Notary Seal State of Missouri Johnson County Commission # 15635199 My Commission Expires May 03, 2019	day of Me	Lyane Lynch (Notary Public)	<u>8</u>			
It is recommended this application be AP	ous.	17	of 			
Super see the concept	D	irector of Liquor Control	the second of the			
City Council Action: Approved	Disapproved Da	te:				

LSPD FORM #446 (New, 08/91, Revised 03/00, 09/12)