

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

Please mark ("x") which <u>one</u> 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)
X 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)

To be completed by applicant as (check one): Corporation Partnership Sole Owner & Operator Corporation/LLC Name: (ALA VERAS, LLC Business Name: () Laveras Lee's Summit, MO 64063 Business Address: (I), (We), the undersigned, hereby apply to the City of Lee's Summit, MO, for the following described license: for the premises described above. Applicant's Name: Joshua G. Edwards Home Address: 2604 Place of Birth: KANSAS Place of Employment (other than business): Leantu Employment Address: 2604 N E Old Paint Rd L.S. ma Phone: 816-365 Email address: Legacyke @amail: com List all previous addresses, if less than five years at current address:______ 1. 2516 NE WILLOW Creek L.S. MO Are you a citizen of the United States of America? <u>Yes</u> If naturalized, give date and place of 2. naturalization: 3. Will you be the person in active control and/or management (managing officer) of this business fulltime? 465. 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? 4e5Provide details: My JAThen, GLENN JEFFERY Edwards & AND MANAGE Smoke Brewing

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

Has any such license listed in question #4 ever been suspended or revoked?/VoIf so, please give complete details:
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:
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?If so, please give complete details:
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.):
Is the proposed location within 300 feet of a church or school?
Name of more gage notice, with any i
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? If so, please explain:
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 liquous sold?If so, please explain:0

authority for the purpose of inspection or seal	officer or investigator who may have legal supervisory rch; and will you permit the removal of all things and ances of Lee's Summit, Missouri, and the laws of the se 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? 465	
IF BUSINESS IS OWNED BY A CORPORATION. COM	IPLETE THIS SECTION:
Name of corporation (Colqueras, L	LC
State in which incorporated: Missouri	Date of incorporation: February 18, 2020
If not a Missouri corporation/LLC, date authorized to do	,
Full name, complete residential address, date of birth	and Social Security Number of the President, Vice
President, Treasurer and Secretary of the corporation (c	or Members of the LLC):
JUSHUA G. EdWARDS ZLOUNE OLD PA	INT Rd LS. ma
SLEND 3 Edwards \ 104 S.E Wester ind	
If stock is not publicly held, give names and residential at the capital stock: N/A	addresses of all stockholders who hold 10% or more of
I wish to have my home address, Date of Birth, and	place of birth withheld from public disclosure (initials)
PASS	
(County of Jackson)	
(State of Missouri)	
1, Jushua G Edwards (Print Applicant's Name)	, being of lawful age and duly sworn upon my oath,
I, Joshua G Edwards (Print Applicant's Name) do swear that the answers, information, and documents	
(**************************************	
do swear that the answers, information, and documents	
do swear that the answers, information, and documents to the best of my knowledge and belief. Subscribed and sworn to before me this 2 vol day	Applicant's Signature
do swear that the answers, information, and documents to the best of my knowledge and belief.	Applicant's Signature
do swear that the answers, information, and documents to the best of my knowledge and belief. Subscribed and sworn to before me this 2 vol day Notary Public - Notary Seel	Applicant's Signature

To Be Provided By Applicant:

- 1) The Applicant and/or Managing Officer (if different) shall provide:
 - a) Copy of State or US Government issued ID and a recent photograph if different than ID picture;
 - 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.
- Copy of Business License (contact Treasury Department at 816-969-1139).
- Copy of Zoning Approval (contact Planning & Development at 816-969-1600).
- 4) Business Location Documents:
 - a) Copy of lease or mortgage showing Proof of Occupancy.
 - b) Recent photographs of the interior and exterior of the premises to be licensed.
 - c) Complete description of the plans, specifications, and fixtures of the proposed place of business. This shall include measurements of the dimensions of the premises where alcohol will be served and sold.
 - d) 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)
- 5) 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.

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

7) Estimated date of opening? October 1, 2021
It is recommended this application be APPROVED / DISAPPROVED this
City Council Action: Approved Disapproved Date:



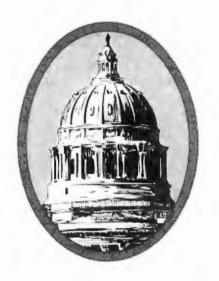
APPLICATION FOR LIQUOR LICENSE

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: Joshua G. E	dwards	
Business Name: CALAVERAS L	LC	Phone: 816-365-9633
Business Address: 219. S.E. M	niN	Lee's Summit, MO 64063
I, the undersigned, hereby make applicatio	n to the City of L	Lee's Summit, Missouri, for a Type "S" liquor license
in accordance with Chapter 4, "Alcoholic	Beverages" Ordin	nance of the City of Lee's Summit, Missouri.
County of Jackson)		
State of Missouri)		
I, (please print) Josh wa Composition of the best of my knowledge and	ormation, and doc	, being of lawful age and duly sworn upon cuments provided with this application are true and Applicant's Signature
Subscribed and sworn to before me this 2	day of	August 2021.
My commission expires Notary Public - Notary Seal State of Missouri, Cass County Commission # 08416145 My Commission Expires March 29, 2021 3033	_	Hathy Hustin Notary Public
It is recommended this application be ARE August, 20		Director of Liquor Control
City Council Action: ☐ Approved ☐ 1	Disapproved	Date:

LSPD FORM #446 (New, 08/91, Revised 03/00, 09/12, 8/20)



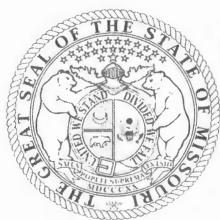
STATE OF MISSOURI Notary Public

TO ALL WHOM THESE PRESENTS SHALL COME:

I, JOHN R. ASHCROFT, SECRETARY OF STATE, of the State of Missouri, on behalf and in the name thereof, appoint and commission as a NOTARY PUBLIC

Kathy Huston 08416145

within and for Cass County, of the State of Missouri, whom I do authorize to discharge, according to law, the duties of a notary public, and to hold and enjoy the same, with all related powers and privileges, for a term of four years, from 3/30/2021 and expiring 3/29/2025.



IN TESTIMONY WHERE OF, I hereunto set my hand and cause to be affixed the GREAT SEAL of the State of Missouri. Done at the City of Jefferson, this 29th day of January, 2021.

Secretary of State