

MISCELLANEOUS PERMIT II

Indicate type of permit you are applying for _____

Present Permit Number _____

1) Full name of applicant or licensee (Partners) _____

2) Street Address of Licensed Premises _____

3) City, town or village - Zip Code _____

4) County _____

5) Trade Name (d.b.a.) _____

6) License Number _____ Date Issued _____

6a) Type of License _____

7) Post Office address of premises _____

8) City, town or village - Zip Code _____

9) Telephone Number _____

10) Between what streets (if outside city limit and not known by bldg.#, specify location in relation to nearest road/highway): _____

11) Title (if applicable) Marshall, Receiver, Executor, etc. _____

State whether applicant owns, leases or operates any branch office, warehouse, storage or distributing plant other than at the premises to be licensed.

If so, give the address of such other premises and the purpose for which the alcohol will be used:

19) For Industrial Alcohol, Non-beverage manufacturer, state the purpose for which the alcohol will be used:

20) Has the applicant filed simultaneously with this application an application for any other type of license for the premises for which this application is filed for.

Yes ()

No ()

