CAMERON PARISH POLICE JURY

P.O. BOX 1280 CAMERON, LOUISIANA 70631

APPLICATION FOR

RETAIL ALCOHOLIC BEVERAGE PERMIT

OFFICE USE ONLY	
RO PERMIT NO.	

				DEVERA	GE PEI	XIVII I			RU	ALL INC.		
INSTRUCTIO	NS: APPLICATION PLEASE TY				PROPER	R FEES AT	TACHED).	RP			
OWNER'S NAME (Name of individual, partne						TRAI	DE NAME				
P.O. MAIL ADDRESS	P.O. BOX NO	. STREE	ET OR RUF	RAL LOCATION		CITY/STAT	ΓE		ZIP			
LOCATION ADDRESS	P.O. BOX NO.	STREE	ET OR RUF	RAL LOCATION		CITY		LOCATION	N PARISH	W	ARD	
	SHIP INDIVIDUAL	١	2 IS THE APPLI				0					
4 IF PREMISES LEASED, GIVE NAME NAME AND ADDRESS OF LESSOR				PREMISES TO BE OCCUPIED? NO FIDE WRITTEN LEASE? ADDRESS								
OCCUPIED BY F	T OF BUILDING TO BE BUSINESS											
	IP OR CORPORATION, " MUST BE ATTACHED IT BE LISTED AND SCH										R BELOW	
	*Name of Person			Corporate	e Officer Title			Kind of In	terest	% (Owned	
) BE CONDUCTED WHO ENTS OR OTHER REPR			OR MORE		ES, LIST NAME EDULE "A" ON		ND FURNISH				
1			2				3					
PARISH BEER P A PUBLISHED I I AM (WE ARE)	IT APPLIED FOR OR I ERMIT AT THIS LOCATION NOTICE OF APPLICATION APPLYING TO THE CAM THE FOLLOWING ADDRE	ON? ENDONE ON PARISH	NO NO NIT WAS T		ANOTH S FOLLOWS:	APPLICANT HIS PERMIT FO ER LOCATION	R CURREN	NT YEAR AT	□NO	RMIT NO.	NTENT	
ADDRESS			TE,			IN THE PARIS	SH OF CAMI	ERON				
NAME OF APPLICA	NAME OF	NEWSPAPE	₹		DATES							
	Published Notice 2. APPLICABLE SQUARI		ation									
BEER TO BE ISSUED FOR FISCAL YEAR ENDING JUNE 30, 20						LIQUOR TO BE ISSUED FOR CALENDAR YEAR ENDING DECEMBER 31, 20_						
DATE SALES OF B OR WILL START AT		DATE			The second secon	ES OF LIQUOI START AT THIS		DAT	E			
APPLICATION IS FO	OR A BEER PERMIT AS FAIL OUTLET		SS B – RE	TAIL PACKAGE		ION IS FOR A S A - RETAIL C			☐ CLASS B – R	RETAIL PAC	KAGE	
FEE		Y 11			FEE							
PENALTY			PENALTY									
TOTAL					TOTAL							

•		FOR A CAME			S TAX	□ NO	* BUSINESS	S THAT H	AS BEE	N SELLING	BEER OF	R LIQUOR	REGULA	ARLY	□ NO
	TION CERTIFICA	ATE AND OCCU	FATIONAL LIC	ENSE			TRADE		LYTOT	HE PRESE	INT THINE?		RMIT NO.		
	IMEDIATE RIOR OWNER														
		SCHEDULE	E A − (To be	answer	ed by C	Owner, Pa	rtner, Agent	or Offic	ials sig	gning this	applica	tion)			
YOUR NAME							RESIDENCE /	ADDRESS							
DRIVER'S LICI	ENSE NO.		SOCIAL SECU	JRITY NO.			DATE OF BIR	TH		PLACE OF	BIRTH				
SEX Male	RACE	ARE YOU A C		☐ YES	ARE YO	DU A CITIZ	EN □YE		OU OVE	R 18 □ YE		DID YOU E	BECOME	A CITIZE	EN?
☐ Female HAVE YOU RE	ESIDED IN LO			200000000000000000000000000000000000000			EVER BEEN CO	111010	0.00			LAWS OF	THE UN	ITFD	☐ YES
PERIOD NOT L FILING THIS A	LESS THAN 2 Y	EARS NEXT PR	ECEDING DAT				UISIANA, OR (271110 07			□ NO
HAVE YOU EV PREMISES FO	VER BEEN CON OR PROSTITUT														☐ YES
DEALING IN N HAVE YOU HA	AD A LICENSE C	OR PERMIT TO S	SELL OR DEAL	IN ALCOH	HOLIC BE	EVERAGES I	SSUED BY TH	E UNITED	STATE	S OR ANY	OTHER S	TATE REV	OKED WI	THIN	☐ YES
	OR TO THIS AP														
HAVE YOU BE	EN CONVICTE	D OR HAD JUD	GEMENT AGA	INST YOU	INVOLVII	NG ALCOHO	DLIC BEVERA	GES BY T	HIS STA	TE OR ANY	OTHER :	STATE OR	THE UN	ITED	☐ YES
STATES WITH	IN 5 YEARS PR	IOR TO THIS A	PPLICATION?								4				□ NO
HAVE YOU E	EVER BEEN (CONVICTED F	OR VIOLATI	NG ANY	OF THE		ARE YOU		YES	YES, IS SF	POUSE EL	IGIBLE FO	OR A PER	MIT?	YES
	OF THE LIQUO	R OR BEER LAV			D CDOIIC	□ NO	MARRIED?		NO	J/YOUR SF					□ NO
FULL NAME O	F SPOUSE			OR HAD	REVOR	KED AN A	LCOHOLIC		ESTABL	ISHMENT	HOLDING	A PARISH	WHOLES	SALE	☐ YES
PERMIT NO.		TRADE NAME		BEVERAG	ES PERM	ADDRESS			BEER/L	TYPE INT		F YES, LIS		EQUITY	0.000
HAVE YOU EV	'ER USED ANY	OTHER NAME	THAN 🗆	YES	-0.011/5	DETAILORI	=1.014/								
THE ONE GIV	EN HEREIN?			NO IF YE	ES, GIVE	DETAILS BI	ELOW			-					
NAME USED					PLAG	CE USED				DATES					
10 TUIO 4 DDI	IOATION DEIN	NAME BY YO		-DELIGE T	OPERM	UT ANY DEE	DOON OTHER	TUANI V	NIDOEL	Fro		1.0011011	To	405	
	ICATION BEING I THE OFFICE								JURSEL	r 10 SEC	JHE AN A	LCOHOLIC	O DEVEN	AGE	☐ YES
I LITIVITI I ITON	ITTLE OTTTOE	OI MEDONIOLIO	DEVENNAL	JOITHOL,	111 1001	AFFID									
CORPO	AFFIDAVIT MUS DRATE PARTNE NDS FOR DENI	RSHIP. IT IS U	NDERSTOOD.												
ISWE	AR (WE SWEAF	R) THAT I HAVE	READ FACH	OF THE Q	UESTION	NS IN THIS	APPLICATION	AND THA	T THE A	NSWERS '	WHICH I H	HAVE GIVE	EN ARE T	RUE AN	ND
CORRE	ECT TO THE BE IANCES ART. 1 NG A STATE OF	ÉST OF MY KNO - 3-1-3-6, ART.	OWLEDGE TH. II - 3-17-3-44,	AT I MEET ART. III - 3	THE QU 3-45-3-47	ALIFICATIO . I FURTHE	NS AND CON	DITIONS S	SET OUT	TIN LA. R.	S. 26:279	AND R.S.	26:79 AN	D PARIS	SH
	CANT'S SIGNAT		LLOALL BLLN							TIT	LE				
	CRIBED AND SV														
NOTAR	RY PUBLIC					_						4.			
INIEODMA.	TION/DETA	II Q													
INFORMA	HONDEIA														
DEDM	ALT EEEO.	BEI	<u>ER</u>							LIC	QUOR				
PERIV	NIT FEES: CLASS A	– RETAIL O	UTLET		\$35.0	00	IN ANY	TOWN.	VILLA	AGE OR	CLAS	S	CLAS	S	
		- RETAIL P		OUSE	\$25.0					PLACE			o <u>B</u>	\$50	.00
RONALD.	J OHNSON , Sh	eriff Parish of	f Cameron D	o Hereby	Certify t	that the abo	ove								
, HONALD	JOHNSON, OF	iom, i anon o	r oamoron, b	O I loloby	oortiny t	inat the ab				Name o	f Applican	t			
did appear be	efore me, and	I, or my staff,	have comple	ted the in	vestigati	on on the a	applicant			N	lame of Ap	plicant			
l do hereby r	ecommend ap	proval of the	applicant for a	a _				for the F	Parish o	of Camero	n.				
					Ту	ype of Permi	t								
RONALD JOHI	NSON SIGNATU	JRE			D.	ATE									

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MAIL APPLICATIONS FOR PERMITS TO:

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