



MISSOURI DEPARTMENT OF PUBLIC SAFETY
DIVISION OF ALCOHOL AND TOBACCO CONTROL

APPLICATION BY ORGANIZATION FOR PICNIC LICENSE

TYPE OR USE ONLY BLACK INK TO COMPLETE THIS APPLICATION MO 829-A0027 (Revised 01/25/2017)

LEGAL NAME OF ENTITY	EMAIL ADDRESS
DOING BUSINESS AS	
PHYSICAL LOCATION ADDRESS OR LOCATION OF ENTITY'S PRINCIPAL OFFICE (STREET ADDRESS)	
CITY, STATE, ZIP CODE	
MAILING ADDRESS (IF DIFFERENT FROM ABOVE)	
BUSINESS TELEPHONE NUMBER	MISSOURI RETAIL SALES TAX NUMBER OR EFFECTIVE DATES OF MISSOURI RETAIL SALES TAX EXEMPTION LETTER
LEGAL NAME OF CHURCH, SCHOOL, CIVIC, SERVICE, FRATERNAL, VETERAN, POLITICAL, OR CHARITABLE CLUB OR ORGANIZATION	
LOCATION OF PRINCIPAL OFFICE	
SPECIFY THE BASIS OF THE ORGANIZATION'S RIGHT TO OCCUPY PREMISES FOR WHICH IT SEEKS A PICNIC LICENSE. (OWN, LEASE, RENTAL AGREEMENT - STATE TERMS OF AGREEMENT).	

PLEASE COMPLETE THE FOLLOWING INFORMATION FOR THE MANAGING OFFICER OF THE ORGANIZATION

LAST NAME	FIRST NAME	MIDDLE INITIAL
DATE OF BIRTH	PLACE OF BIRTH	SEX <input type="checkbox"/> M <input type="checkbox"/> F
HOME PHONE NUMBER	E-MAIL ADDRESS	
CURRENT ADDRESS	CITY	STATE & ZIP CODE
IS MANAGING OFFICER A NATURALIZED CITIZEN? <input type="checkbox"/> YES <input type="checkbox"/> NO		
IF YES, LIST DATE AND COURT WHICH ADMITTED YOU TO CITIZENSHIP.		
CITY, TOWN OR VILLAGE WHERE THE MANAGING OFFICER PAYS TAXES		
MANAGING OFFICER IS REGISTERED TO VOTE IN THE FOLLOWING		
PRECINCT	CITY	WARD COUNTY

INFORMATION CONCERNING OWNER(S), MANAGING OFFICER, SHAREHOLDER(S), MEMBER(S)		YES	NO
1	Has the organization, the managing officer, any officer or director, or any person with a direct or indirect financial interest in the organization ever been charged with or indicted for, received a suspended imposition of sentence for, or been convicted of a violation of any Federal law, law of the State of Missouri or any other state or country, or entered and/or been present in the United States in violation of Federal immigration laws?	<input type="checkbox"/>	<input type="checkbox"/>
2	Has the organization, the managing officer, any officer or director, or any person with a direct or indirect financial interest in the organization ever had a license revoked or suspended by the Supervisor of Alcohol and Tobacco Control or by the licensing authority of any other state, county or city?	<input type="checkbox"/>	<input type="checkbox"/>
3	Does the organization, any officer or director, or the managing officer have any direct or indirect financial interest in any brewery, winery, distillery, rectifying or blending plant, or gasohol facility, or wholesale liquor or beer concern, either as part owner, shareholder, agent, employee or otherwise?	<input type="checkbox"/>	<input type="checkbox"/>
4	Will any distiller, wholesaler, winemaker or brewer, or any employee, officer, or agent thereof, directly or indirectly, loan, give away, or furnish equipment, money, credit, or property of any kind to the organization, except ordinary commercial credit for liquor sold to the organization and accept such articles and services, if any, as are permitted by Section 311.070, RSMo, or the Rules and Regulations of the Supervisor of Alcohol and Tobacco Control, or any who has done so?	<input type="checkbox"/>	<input type="checkbox"/>
5	Is this application made by the organization as a subterfuge to permit any person or entity other than the organization to secure a license from the Supervisor of Alcohol and Tobacco Control, in the organization's name, for his/it's benefit?	<input type="checkbox"/>	<input type="checkbox"/>

IF YOU ANSWERED "YES" TO ANY QUESTION ABOVE, EXPLAIN THE ANSWER IN DETAIL BELOW BY PLACING THE QUESTION NUMBER NEXT TO THE EXPLANATION. USE ADDITIONAL SHEET(S) IF NECESSARY.

QUESTION #	EXPLANATION

IMPORTANT

You are required to report any change of fact contained herein within ten (10) days!

The organization understands that false answers are grounds for denial of a license. The organization understands that if any statements or answers made herein are untrue and the license herein applied for is granted, such license may be revoked, suspended, fined, placed on probation or otherwise disciplined by the Supervisor.

The organization acknowledges that any license granted by the Supervisor will be subject to the provisions of Chapter 311, RSMo, and the Rules and Regulations of the Supervisor of Alcohol and Tobacco Control, and that failure to conform thereto will subject its license to suspension, revocation, fine, probation or other discipline by the Supervisor. Further, the organization agrees to allow inspections made in accordance with the Rules and Regulations of the Supervisor of Alcohol and Tobacco Control, and authorizes the Supervisor of Alcohol and Tobacco Control or his duly appointed Agents to examine and secure copies of any and all business records or documents related in any way to this business, including, but not limited to, those on file with any bookkeeper.

The organization authorizes the Supervisor of Alcohol and Tobacco Control or his duly appointed Agents to examine and secure copies of any and all financial records, including without limitation, signature cards, checking and savings account statements, notes and loan documents, deposit and withdrawal records, and escrow documents of it's financial institution(s), and any financial documents related to the business.

The organization authorizes the Supervisor of Alcohol and Tobacco Control or his duly appointed Agents to conduct a criminal record check of the managing officer and of all the organization's officers and directors.

I, _____, of lawful age, being first duly sworn upon my oath,

(TYPE OR PRINT NAME)

depose and say that I have read this application and fully understand same and that I know the contents thereof and the answers and statements contained therein and that the same are true.

SIGNATURE OF MANAGING OFFICER	DATE
-------------------------------	------

FOR OFFICE USE ONLY - DO NOT WRITE IN AREA BELOW

Based on the information contained herein, the undersigned forward this application for consideration by the Supervisor of Alcohol and Tobacco Control and hereby recommend that this application be approved and the license issued.

AGENT	DISTRICT SUPERVISOR
-------	---------------------

STATE SUPERVISOR



MISSOURI DEPARTMENT OF PUBLIC SAFETY
 DIVISION OF ALCOHOL AND TOBACCO CONTROL
RETAIL LIQUOR BY DRINK (PICNIC) 7 DAYS

- 1. Completed picnic application form filled out in **BLACK INK** or **TYPED**, and **SIGNED** by Managing Officer.
- 2. **Cashier's check or Money Order** payable to the **MISSOURI DIRECTOR OF REVENUE** in the amount of \$25. A business check or cash will not be accepted.
- 3. **Copy of Missouri Retail Sales Tax license** in the correct name of the organization, or letter from the Missouri Director of Revenue exempting the organization from payment of sales tax.
- 4. **Current Statement of No Sales/Use Tax Due** from the Missouri Department of Revenue **DATED WITHIN THE PRECEDING 90 DAYS**. (Information is available at www.dor.mo.gov or call (573)751-9268.)
- 5. Copy of the Managing Officer's **PAID PERSONAL PROPERTY** or **REAL ESTATE TAX RECEIPT** for the year immediately preceding the date of application.
- 6. Copy of the managing officer's **VOTERS REGISTRATION CARD, LETTER OR CERTIFICATE**.
- 7. Letter from the **PROPERTY OWNER** giving permission for the organization to sell Retail Liquor By the Drink at the said location during the date of the application.
- 8. Filled out Managing Officer Appointment Form giving the managing officer permission to obtain a picnic license in the organization's name for the day or days the event will be held.
- 9. Copy of city letter of approval (if located in an incorporated area) or city license.

In addition to the foregoing requirements, applicants applying for Retail Liquor By the Drink (picnic) licenses are required by law to notify the Director of Revenue at the Truman State Office Building, Room 330, 301 West High Street, Jefferson City Missouri, 65101 of the holding of the event by certified mail, accepting responsibility for the collection and payment of any applicable sales tax.

The hours of sale for this type of license will be: LIQUOR, BEER AND WINE may be sold between the hours of 6:00 a.m. and 1:30 a.m. on weekdays and on Sunday beginning at 11:00 a.m. until 12 MIDNIGHT.

PLEASE RETURN ALL ITEMS AND APPLICATION TO:

District I - Kansas City

Division of Alcohol & Tobacco Control
 1738 E. Elm, Lower Level
 Jefferson City, MO 65101

(573) 526-2769
 (573) 751-2333

District II - Jefferson City

Division of Alcohol & Tobacco Control
 1738 E. Elm, Lower Level
 Jefferson City, MO 65101

(573) 751-0462
 (573) 751-2333

District III - St. Louis

Division of Alcohol & Tobacco Control
 1738 E. Elm, Lower Level
 Jefferson City, MO 65101

(573) 522-0022
 (573) 751-2333

District IV - Cape Girardeau

Division of Alcohol & Tobacco Control
 1738 E. Elm, Lower Level
 Jefferson City, MO 65101

(573) 751-3868
 (573) 751-2333



District V - Springfield

Division of Alcohol & Tobacco Control
 1738 E. Elm, Lower Level
 Jefferson City, MO 65101

(573) 751-5454
 (573) 751-2333



MISSOURI DEPARTMENT OF PUBLIC SAFETY
DIVISION OF ALCOHOL AND TOBACCO CONTROL
MANAGING OFFICER APPOINTMENT FORM

MANAGING OFFICER APPOINTMENT FORM

DATE _____

_____, has appointed
(NAME OF CORPORATION OR ORGANIZATION)

_____ as Managing
(NAME OF MANAGING OFFICER)

Officer for the corporation/organization. The Managing Officer is a person in the licensee's employ, either as an officer or as an employee who is vested with the general control and superintendence of a whole, or a particular part of, the licensee's business, as required by 11 CSR 70-2.030(7).

Officer of the Organization