



**MISSOURI DEPARTMENT OF PUBLIC SAFETY  
DIVISION OF ALCOHOL AND TOBACCO CONTROL  
APPLICATION FOR REFUND**

Name of Corporation, Individual, Partnership, LLC (exact name)		Email:	
Doing Business As			
Address			
City		State	Zip Code
License Number		License Type	
<p>Being duly sworn on his/its oath, says that he/it has never used the license issued to him/it by the Supervisor of Alcohol and Tobacco Control of the State of Missouri for the year commencing _____, that said license is attached hereto <input type="checkbox"/> or at Central Office <input type="checkbox"/>, and he/it requests a refund of the amount paid by him/it for said license \$_____ and requests that the refund in this amount be mailed to him/it at the following address:</p> <p>NAME: _____</p> <p>ADDRESS: _____</p> <p>CITY, STATE, ZIP CODE: _____</p> <p>TELEPHONE NUMBER: (____) _____</p>			
SIGNATURE OF M.O., OWNER, PARTNER		DATE	SIGNATURE OF PARTNER
SIGNATURE OF PARTNER		DATE	SIGNATURE OF PARTNER
NOTARY PUBLIC			
<p>Subscribed and sworn to before me this _____ day of _____ 20____.</p> <p style="text-align: center;">_____ NOTARY PUBLIC SIGNATURE</p> <p>My Commission expires on the _____ day of _____ 20____.</p>			
FOR OFFICE USE ONLY			
Refund <input type="checkbox"/> Recommended <input type="checkbox"/> Not Recommended by Agent			
AGENT SIGNATURE		DATE	
DISTRICT SUPERVISOR SIGNATURE		DATE	
SUPERVISOR OF ALCOHOL AND TOBACCO CONTROL SIGNATURE		DATE	



Missouri Department of Public Safety  
Division of Alcohol and Tobacco Control

## **CHECKLIST OF REQUIREMENTS FOR REFUND APPLICATION**

**REFUNDS MAY BE APPROVED FOR UNUSED LICENSES ONLY.**

**ALLOW 10 – 21 DAYS FOR PROCESSING**

1. APPLICATION FOR REFUND FORM – Completed and notarized.
2. LICENSE – The unused license for which a refund is being requested must be returned with the application. If you do not have the license, a written explanation must be provided.
3. EXPLANATION FOR REQUEST – A written explanation of why the refund is requested. If the business has or will go out of business, please provide the date the license should be placed out of business. If a temporary event was cancelled/rescheduled, please provide documentation from the property owner or event organizer advising of such.

### **FOR OFFICE USE ONLY**

THE LICENSE NEEDS TO BE PLACED OUT OF BUSINESS BEFORE A REFUND CAN BE ISSUED.  
COMPLETE AN OUT OF BUSINESS CARD IF NEEDED AND SUBMIT IT WITH THE REQUEST FOR REFUND.



**CHECKLIST OF REQUIREMENTS FOR REFUND APPLICATION**

**RETURN DOCUMENTS TO:**

District I – Kansas City	District II – Jefferson City	District III – St. Louis	District V – Springfield
Division of Alcohol & Tobacco Control 8800 E. 63 <sup>rd</sup> Street, Ste. 180 Raytown, MO 64133  (816) 743-8888  <b>Servicing (Missouri):</b> Andrew, Atchison, Bates, Benton, Buchanan, Caldwell, Carroll, Cass, Clay, Clinton, Daviess, DeKalb, Gentry, Grundy, Harrison, Henry, Holt, Jackson, Johnson, Lafayette, Livingston, Mercer, Nodaway, Pettis, Platte, Ray, Saline, Vernon, Worth  <b>Non-Missouri:</b> Applicants with a legal name beginning with DIGITS or the letter A through F (exclude the word “The” when determining which district to submit to).	Division of Alcohol & Tobacco Control 1738 E. Elm St. – Lower Level Jefferson City, MO 65101  (573) 526-4026  <b>Servicing (Missouri):</b> Adair, Audrain, Boone, Callaway, Camden, Chariton, Clark, Cole, Cooper, Crawford, Franklin, Gasconade, Howard, Knox, Lewis, Linn, Macon, Maries, Marion, Miller, Moniteau, Monroe, Montgomery, Morgan, Osage, Pike, Putnam, Ralls, Randolph, Schuyler, Scotland, Shelby, Sullivan, Warren, Washington  <b>Non-Missouri:</b> Applicants with a legal name beginning with the letter G through O (exclude the word “The” when determining which district to submit to).	Division of Alcohol & Tobacco Control 7545 S. Lindbergh Blvd., Ste. 150 St. Louis, MO 63125  (314) 416-6280  <b>Servicing (Missouri):</b> Bollinger, Butler, Cape Girardeau, Dunklin, Jefferson, Lincoln, Madison, Mississippi, New Madrid, Pemiscot, Perry, Scott, St. Charles, St. Francois, St. Louis City, St. Louis Co., Ste. Genevieve, Stoddard, Wayne  <b>Non-Missouri:</b> Applicants with a legal name beginning with the letter P through Q (exclude the word “The” when determining which district to submit to).	Division of Alcohol & Tobacco Control 505 B East Walnut St. – (Lower Level) Springfield, MO 65806  (417) 895-5004  <b>Servicing (Missouri):</b> Barry, Barton, Carter, Cedar, Christian, Dade, Dallas, Dent, Douglas, Greene, Hickory, Howell, Iron, Jasper, Laclede, Lawrence, McDonald, Newton, Oregon, Ozark, Phelps, Polk, Pulaski, St. Clair, Reynolds, Ripley, Shannon, Stone, Taney, Texas, Webster, Wright  <b>Non-Missouri:</b> Applicants with a legal name beginning with the letter R through Z (exclude the word “The” when determining which district to submit to).