



3939 SOUTH LINDBERGH BOULEVARD
SUNSET HILLS, MISSOURI 63127

PHONE: (314) 849-3400
FAX: (314) 849-8110
www.sunset-hills.com

TEMPORARY LIQUOR LICENSE APPLICATION

Lic# 21186

The undersigned hereby makes application to the City of Sunset Hills Board of Aldermen for a temporary license to sell:

Please check appropriate box below:

- 1. Not For Profit liquor by the drink for consumption on the premises where sold

There shall be a limited permit to sell liquor by the drink for consumption on the premises where sold for a church, school, civic, service, fraternal, veteran, political or charitable club or organization at a picnic, bizarre, fair or other special event gathering. Such permit shall only be issued for the day or days specified and **shall not be for more than seven (7) days per fiscal year.**

For such a permit, the licensee shall pay fifty dollars (\$50.00)
And make a deposit in the amount of three hundred fifty dollars (\$350.00)

Which represents approximately eight (8) man hours of traffic control and police supervision. Any unexpended portion of the aforesaid deposit shall be refunded to the licensee after no other sales of intoxicating occur as a result of the event. Any additional cost incurred, in excess of three hundred fifty dollars (\$350.00), shall be billed to the licensee and paid.

- 2. For Profit liquor by the drink for consumption on the premises where sold

There shall be a limited permit to sell liquor by the drink for consumption on the premises where sold for a for-profit entity at a picnic, bizarre, fair or other special event gathering. Such permit shall only be issued for the day or days specified and **shall not be for more than seven (7) days per fiscal year.**

For such a permit, the licensee shall pay one hundred fifty dollars (\$150.00) *CK# 9278*
And make a deposit in the amount of three hundred fifty dollars (\$350.00) *CK# 9277*

Which represents approximately eight (8) man hours of traffic control and police supervision. Any unexpended portion of the aforesaid deposit shall be refunded to the licensee after no other sales of intoxicating occur as a result of the event. Any additional cost incurred, in excess of three hundred fifty dollars (\$350.00), shall be billed to the licensee and paid.

****License Fees and Deposit Fees shall be submitted in two separate payments**

Business Name 4 Hands Brewing Company
Address of business 1220 S. 8th Street
State MO Zip Code 63104 Phone No. 314-~~486~~-436-1559
E-MAIL ADDRESS chris@4handsbrewery.com

Applicant hereby agrees that if a permit or license is granted upon this application, that applicant or any officer, agent, employee or servant of applicant will not violate any provision of the ordinances of the City of Sunset Hills or any law of the State of Missouri while in or upon the premises of the applicant herein described, nor allow any other person so to do.

Applicant hereby agrees that if the applicant or any of the officers, agents, servants or employees of the applicant shall violate any of the provisions of said ordinances, or the Act of the General Assembly of the State of Missouri, under the authority of which said ordinances were adopted, or any other law of the State of Missouri or ordinance of the City of Sunset Hills, Missouri, relating to the regulation, control, sale, manufacture, possession, transportation or distribution of intoxicating liquor, or fails to obtain and at all times have a license from the State Supervisor of Liquor Control of Missouri, or shall have made or there shall have been made in applicant's behalf a false affidavit in applying for this license, the Board of Aldermen of the City of Sunset Hills may revoke any permit or license issued upon this application in the manner now or hereafter provided by ordinance

Applicant states with reference to ownership of the business that:

a) The owner(s) of the business to be carried on at the location referred to herein is (are)

_____ whose phone number(s) is are _____

b) If a partnership, the names of all partners Kevin Lamp

c) If a corporation, the names of all principal officers _____

The registered agent's name and address are _____

The person signing this application is the applicant or the Managing Officer of applicant and has power and authority to make this application and affidavit.

Number of days requested for temporary liquor license 3 (May 6th, 7th, 8th)

Location where temporary sales are to be made Laurmeier Sculpture ~~At~~ Park

Hours of operation (6th 6pm - 10pm) (7th 10am - 8pm) (8th - 10am - 5pm)

Missouri Sales Tax ID# 21183317

Missouri Secretary of State registration # NOT SUE WHICH ONE

File #: 201036390819

Character #: LC1108046

Laurmeier Sculpture Park
12580 Rott Rd.
Springton, MO 63127

Applicant hereby states that: No permit issued by the City of Sunset Hills, Missouri, or by the Supervisor of Liquor Control of the State of Missouri under the Acts of the General Assembly of Missouri has been revoked or suspended.

That affiant, or manager in charge of the business in Sunset Hills, Missouri, has not been convicted, since the ratification of the 21st Amendment of the Constitution of the United States, or a violation of the provisions of any law applicable to the manufacture or sale of intoxicating liquor and the applicant does not employ or has not employed in his business any person whose license has been revoked or who has been convicted of violating the provisions of any such law since the date afore-said.

That affiant, or manager in charge of the business in Sunset Hills, Missouri, has not been convicted of any misdemeanor or felony under the laws of the United States, the State of Missouri, or any other state.

That applicant, or applicant's agents and employees, will not violate any law of the State of Missouri, or ordinance of the City of Sunset Hills, nor allow any other person to violate any law in this State or City while in or upon the premises herein; applicant(s) acknowledges that he (it, they) is (are) familiar with the ordinances of the City of Sunset Hills regulating the sale of liquor.

Chris Trunk
Applicant's Name (printed or typed)

Chris Trunk
Applicant's Signature

Subscribed and sworn before me, _____

City Clerk's Signature

Date of Aldermanic approval:
