

State of Rhode Island

Board of Licensing Commissioners

Application for License by Corporation
Ft. Getty Pavilion use ONLY

Retailer Class:

F _____ -or- F1 _____

Date of Event: _____ (19 hour maximum)

Name of Applicant (Corp. Name): _____

DBA: _____ **Phone #:** _____

Address of Premise: _____

Hours of Operation: _____

State – Incorporated: _____ **Date of Incorporation:** _____

Name Address, Phone # and Date of Birth of all Officers: (8/16/39)

President: _____

Vice President: _____

Secretary: _____

Treasurer: _____

Name and Address of all Directors or Board Members:

Classes of Stock:

Amount of Each Authorized: _____ **Amount of Each Issued:** _____

Names and Addresses of All Registered Owners of Each Class and Amount Owned:

If any of the above stock is hypothecated or pledged provide details:

If application is in behalf of undisclosed principal or party in interest, give details:

Does Applicant Own Premise? YES -or- NO Is Property Mortgaged? YES -or- NO

Is Property Leased? YES -or- NO

Give Name and Address of Mortgage or Lessee Amount of Extent:

Have any Officers, Board Members or Stockholders ever been arrested or convicted of a crime? YES -or- NO (if Yes explain): _____

Is any other business to be carried on in Licensed Premises? YES -or- NO
(if Yes explain): _____

Is any Officer, Board Member or Stockholder engaged in any manner as a Law Enforcement Officer? YES -or- NO (if Yes explain): _____

Is Applicant or any of its Officers, Board Members or Stockholders interested directly or indirectly, as principle or associate, or in any manner whatsoever, in any retail license issued under Chapter 3-7 of the General Laws of Rhode Island, 1956, as amended?
If yes, explain.

Is Applicant the owner or operator of any other business? YES -or- NO If yes, explain:

State amount of capital invested in the business: _____

Does applicant have a draft system: YES -or- NO

I hereby certify that the above statements are true to the best of my knowledge and belief.

Applicant

Date

Witness of Licensing Board or Notary Public

Date of Witness or Notary Expiration

Instructions for Corporation Applicants

1. Every question on the Application Form must be answered. Any false statement made by the Applicant will be sufficient grounds for the denial of the application or the revocation of the license in case one has been granted.
2. Corporations having 25 or more stockholders need not file a list of the names and addresses of stockholders (question #8).
3. Attention is called to the requirements of the 1963 amendment of Section 3-5-10 of the General Laws.
 - a. All newly elected officers or directors must be reported to the Board of License Commissioners within 30 days.
 - b. Any acquisition by any person of more than 10% of any class of corporate stock must be reported within 30 days.
 - c. Any transfer of 50% or more of any class of corporate stock can be made only by written application to the licensing board subject to the procedures for a transfer license.
4. Submit with this application a copy of the proposed menu – Class BV;BVL.
5. Submit with this application a copy of Pharmacist’s Dept. of Health Licenses. (Class E)

(Copy Shall Be Forwarded To Liquor Control Administration By Town Clerk)

Town of Jamestown, Rhode Island

Board of License Commissioners Alcoholic Beverage License Application

As part of the application process for a liquor license in the Town of Jamestown, the Alcoholic Beverage Licensing Commission of said town conducts an investigation to determine if the applicant has ever been convicted of any crime in this state or any other state. The applicant acknowledges the same, and consents to the investigation by the Commission or its designee, including the Jamestown Police Department, and the release of any information relating to a past criminal conviction of the applicant by any federal, state or municipal source to the Commission or its designee.

Signature of Applicant: _____

For Office Use Only

Certificate of Liability Insurance: _____ **License Fee:** \$ _____ **Date:** _____
(minimum \$1,000,000)

Approval: Please Sign & Date

Chief of Police: _____

Fire Chief: _____

Building/Building Official: _____

Water & Sewer Clerk: _____

Tax Collector: _____

Parks & Recreation Director: _____

Public Works Director: _____



This application has been **GRANTED/DENIED** by the Jamestown Town Council at a meeting held on the _____ day of _____, 20____ for the day of the event to be held on: _____ ;

Location: _____

Issued: _____

Kimberly A. Turcone, Deputy Town Clerk

Please keep this license on hand for the duration of the event