CITY OF MESQUITE
LIQUOR LICENSE APPLICATION

To: The City Council, City of Mesquite, Nevada:

The Undersigned Hereby Applies for the Following License or Licenses, and if Granted Will Accept Same, Subject to all Terms, Regulations and Provisions of the Ordinance or Regulation Under Which it is Granted.

Please type or print all information. If more space is required, please attach separate sheet.

_____

NAME OF APPLICANT **DBA-BUSINESS NAME AS IT SHOULD APPEAR ON LICENSE**

_____

BUSINESS PHYSICAL ADDRESS (Number, Street, Zip) BUSINESS TELEPHONE

_____

BUSINESS MAILING ADDRESS

_____

NAME AND ADDRESS OF PROPERTY OWNER

1. Type of Organization:

Corporation	_____	General Partnership	_____
Limited Liability Corporation	_____	Limited Liability Partnership	_____
Limited Partnership	_____	Sole Proprietor	_____

Other Please Describe _____

2. If a Foreign Corporation:
   Organized under the Laws of Which State: _____ When?_____

3. Name & Address of Corporate Resident Agent: _____

4. If a Partnership:
   a. Is the Certificate of Partnership Registered with Clark County Recorder?_____
      Date Registered: _____
   b. What is the Term for the Partnership to Exist? _____

5. If a Corporation or Partnership, list each officer and percentage applied for:
   If an Individual, complete all applicable Items: (Pleas add additional sheet if necessary).

NAME	TITLE	ADDRESS	PHONE	%	U.S. CITIZEN

6. Please list the Key Employ _____
   Name Address/City/State Phone

7. NUMBER, TYPE & FEE OF LICENSE APPLIED FOR:

		Origination Fee	Renewal Fee
____	Beer, Wine, Spirit Based Products Off- Sale	$5,000	$800/Semi-Annual
____	Beer, Wine, Spirit Based Products On- Sale	$2,500	$750/Semi-Annual
____	Restaurant w/ Bar	$3,500	$750/Semi-Annual
____	Restaurant w/ Service Bar	$2,500	$500/Semi-Annual
____	Full Liquor Off-Sale	$20,000	$3,500/Semi-Annual
____	Full Liquor On-Sale	$2,500	$350/Semi-Annual
____	Tavern	$12,500	$1,000/Semi-Annual
____	Brew Pub	$12,500	$1,000/Semi-Annual
____	Non-Restricted/Restricted Gaming	$25,000	$3,500/Semi-Annual
____	Wholesale Import	$3,500	$750/Semi-Annual
____	Nonprofit Club	$300	$200/Semi-Annual
____	Liquor Catering	$150/day	

(After the issuance of a license, each licensee shall pay, in addition to all other fees, a semiannual license renewal processing fee of $50.00)

TOTAL LICENSE FEES PAID WITH THIS APPLICATION: $_____

INVESTIGATION FEE: $250.00 per person for the first 3 persons and $100.00 each additional person.

Nonprofit Club Liquor License: The investigation fee shall be $100.00. (M.M.C. 2-4-3)

INVESTIGATION FEE PAID: $_____

I hereby acknowledge and promise to pay all non-refundable investigation fees in an amount equal to the actual cost incurred by the City to complete the necessary investigation, and understand that this is due and payable prior to final action on my application.

Please Print Applicant Name _____ Title _____

Signature of Applicant: _____ Date _____

Office Use Only

License # _____ Date _____ Receipt #_____ Amount _____

City Council Date _____ City Council Approval Date _____

10 E. Mesquite Blvd., Mesquite, NV 89027
702-346-2835 ext 3305, www.mesquitenv.gov

Si necesita asistencia en Espanol, por favor pregunte y alguin le ayudara

CITY OF MESQUITE
BUSINESS LICENSE DIVISION

PRIVILEGED LIQUOR LICENSE
BACKGROUND INVESTIGATION APPLICATION CHECKLIST

_____ Fingerprint Cards - Two (2) Each Applicant (Provided by Mesquite Police)

_____ Applicant Contact Information and Notice Form

_____ Affidavit of Full Disclosure

_____ Applicant's Request to Release Information

_____ Personal History

Copies of Nevada State Gaming Application Personal & Financial histories may be substituted for City forms.

PLEASE NOTE: MESQUITE MUNICIPAL CODE REQUIRES THAT EACH APPLICANT FOR A PRIVILEGED LICENSE MUST UNDERGO A BACKGROUND INVESTIGATION AND SAID APPLICANT SHALL PAY THE ENTIRE COST INCURRED BY THE BUSINESS LICENSE DIVISION AND/OR THE MESQUITE POLICE DEPARTMENT TO COMPLETE THE INVESTIGATION.

Mesquite
Nevada

APPLICANT CONTACT INFORMATION

Applicant Name: _____
First Middle Last

Physical Address: _____
Street Address City State Zip

Mailing Address: _____
Street Address City State Zip

Phone #: _____ Secondary Phone #: _____

E-mail Address: _____ Fax #: _____

Proposed Business Name/Address:

_____

_____

_____

_____

NOTICE TO APPLICANTS FOR A PRIVILEGED LIQUOR LICENSE

MESQUITE MUNICIPAL CODE REQUIRES THAT EACH APPLICANT FOR A PRIVILEGED LIQUOR LICENSE MUST UNDERGO A BACKGROUND INVESTIGATION AND SAID APPLICANT SHALL PAY THE ENTIRE COST INCURRED BY THE BUSINESS LICENSE DIVISION OR THE MESQUITE POLICE DEPARTMENT TO COMPLETE AN INVESTIGATION.

At the time of filing, a new applicant will be required to submit a non-refundable investigation deposit fee as follows:

Liquor Investigation & fingerprinting fee = $250.00

If applicant is applying for both Liquor and Gaming, one investigation & fingerprinting fee of $250.00 will be charged.

I understand that the fee submitted as required is non-refundable. I hereby agree to pay the entire cost of the investigation, whether the application is approved or denied. I understand that such costs are due to the City of Mesquite, and the deposit fee must be paid in full before the investigation can begin.

Signature of Applicant:_____

Date:_____

AFFIDAVIT OF FULL DISCLOSURE

STATE OF NEVADA

COUNTY OF CLARK

I, _____, DO HEREBY SWEAR, AS REQUIRED BY LAW, THAT THE APPLICATION SUBMITTED HEREWITH AND ANY ADDITIONAL INFORMATION SUBMITTED IN SUPPORT OF THIS APPLICATION CONTAINS A FULL AND TRUE ACCOUNT OF THE INFORMATION REQUESTED; AND THAT I EXECUTED THE SAME FREELY AND VOLUNTARILY AND FOR THE USES AND PURPOSES THEREIN MENTIONED, AND WITH THE KNOWLEDGE THAT MISREPRESENTATION OR FAILURE TO REVEAL INFORMATION REQUESTED MAY BE DEEMED SUFFICIENT EVIDENCE FOR PROSECUTION FOR PERJURY UNDER NRS 199.145, AND REFUSAL TO ISSUE OR REVOCATION OF LICENSE APPLIED FOR.

_____
Signature of Applicant

Subscribed and Sworn to Before Me this ___ day of _____, 20___

_____
Notary Public In and For Said County & State

Mesquite
Nevada

APPLICANT'S REQUEST TO RELEASE INFORMATION

TO: CITY OF MESQUITE

FROM: _____

1. I understand that I am applying for a privileged license, permit or work card from the City of Mesquite, Nevada and acknowledge that the burden of proving my qualifications for such a privilege is at all times upon me. I further understand that a full investigation will be made of my background, character and financial responsibility by the Mesquite Police Department as agent of and for use by the City of Mesquite and I accept any risk of adverse public notice, embarrassment, criticism or financial loss which may result from action with respect to my application. This authorization and request is given freely and without duress, voluntarily waiving any protection against unauthorized disclosure of information under the Privacy Act and other similar legal provisions.

2. I hereby authorize and request all persons, to whom this request is presented, having information relating to or concerning me, to furnish such information to a duly appointed officer of the Mesquite Police Department, whether or not such information would otherwise be protected from disclosure by any constitutional, statutory or common law privilege.

3. I hereby authorize and request all persons to whom this request is presented, having documents relating to or concerning me, to permit a duly appointed officer or the Mesquite Police Department to review and copy any such documents, whether or not such documents would otherwise be protected from disclosure by any constitutional, statutory or common law privilege.

4. If the person to whom this request is presented is a brokerage firm, bank, savings and loan or other financial institution, or an officer of same, I hereby authorize and request that a duly appointed officer of the Mesquite Police Department be permitted to review and obtain copies of any and all documents, records or correspondence pertaining to me, including but not limited to, past loan information, notes co-signed by me, checking account records, savings deposit records, safe deposit records, and general ledger folio sheets.

5. If the person to whom this request is presented is a criminal justice agency or a repository of records of criminal history whether within or without the State of Nevada, I hereby authorize and request that a duly appointed officer of the Mesquite Police Department be permitted to review and obtain copies of any and all documents, records, investigations, photographs or other information pertaining to me, including but not limited to, arrests, charges, convictions, dispositions, investigative and intelligence information, records of licensing and work permit agencies, including the Gaming Control Board of the State of Nevada and records of parole and pardon agencies.

6. I do hereby make, constitute and appoint any duly appointed officer of the Mesquite Police Department my true and lawful attorney in fact for me in my name, place and stead, and on my behalf and for use and benefit:

   (a) To request, review, copy, sign for and otherwise act for investigative purposes with respect to documents and information in the possession of the person to whom this request is presented as I might or could do if personally present;

   (b)To name the person or entity to whom this request is presented and insert that person's name in the appropriate location on this request; and

   (c)To place the name of the Mesquite Police Department officer presenting this request in the appropriate location on this request

7. I grant to said attorney in fact full power and authority to do, take and perform all and every act and thing whatsoever requisite, proper or necessary to be done in the exercise of any of the rights and powers herein granted, as fully to all intents and purposes as I might or could do if personally present, with full power of substitution or revocation, hereby ratifying and confirming all that said attorney in fact, or his substitute or substitutes, shall lawfully do or cause to be done by virtue of this power of attorney and the rights and powers herein granted.

8. This power of attorney ends eighteen months from the date of execution.

9. I do, for myself, my heirs, executors, administrators successors, and assigns, hereby release, remise and forever discharge the person to whom this request is presented, and his agents and employees, from any and all manner of actions, claims and demands whatsoever, known or unknown, in law or equity, which I ever had, now have, may have or claim to have against the person to whom this request is presented, or his agents or employees, arising out of or by reason of complying with this request.

10. I agree to indemnify and hold harmless the person to whom this request is presented and his agents and employees, from and against all claims damages, losses and expenses, including reasonable attorney's fees, arising out of or by reason of complying with this request.

11. A reproduction of this request shall be, for all intents and purposes, as valid as the original.

In witness whereof, I have executed this request at _____ on this
(City) (State)
_____ day of _____, 20____.

_____
Signature of Applicant

Subscribed and sworn to before me this _____ day of _____, 20____.

_____
Notary Public in and for said County & State

_____
Name of the Mesquite Police Department officer presenting this request:

_____
Signature of the Mesquite Police Department officer presenting this request:

_____
Date of Request:

CITY OF MESQUITE
MESQUITE POLICE DEPARTMENT
PERSONAL HISTORY QUESTIONNAIRE FOR LIQUOR LICENSE

Office Use Only

Business License	Police
Received By:_____	Received By:_____
Date:_____	Date:_____

General Instructions:

Handprint or type an answer to every question. If a question does not apply to you, so state N/A. If space available is insufficient, use a separate sheet and precede each answer with the number of the referred block. Do not misstate or omit any material fact(s) since the statements made herein are subject to verification. **Applicant must initial each page as provided, in lower left corner**.

All applicants are advised that this application is an official document and misrepresentation or failure to reveal information requested may be deemed to be sufficient cause for refusal or revocation of a license.

Application For:_____
(Type of License Desired)

_____
(Name and Address of Establishment for which license is requested)

_____
(Name under which it is now operated)

1. _____
Last Name First Name Middle Name

_____
Aliases, Nickname, Maiden Name, Other Name Changes, Legal or Otherwise

_____
Present Residence Street Address City State Zip

2. _____
Present Business Address City State Zip

_____
Type of Work Work Telephone Residence Telephone

3. _____
Date of Birth Place of Birth (City, County, State)
NOTE: Please attach a copy of applicants Birth Certificate to the application

4. Social Security #_____

5. Age_____ Height_____
Weight_____ Eye Color_____
Hair_____ Complexion_____
Sex_____ Build_____

Applicant Initials_____ PHQ

6. Scars, Tattoos, or distinguishing marks and/or characteristics:

_____

_____

_____

7. Do you wear corrective lenses? Yes_____ No_____

8. Are you a citizen of the United States? Yes_____ No_____

If Naturalized, certificate #_____ Date_____

Place_____
(If naturalized, document must be verified)

9. Marital Status

Spouse's Name and Maiden Name:_____ -_____

If spouse's is employed; please state where and job title:

_____

10. Are you a registered voter of the state of Nevada? Yes_____ No _____

11. Military Status

Have you ever served in any armed forces? Yes ____ No ____.
If Yes, attach copy of your DD-214 form.

Branch_____ Active ☐ Guard ☐ Reserve ☐

Date of Entry-Active Service_____ Date of Separation_____

Type of Discharge_____ Rating at Separation_____

Serial Number_____

While in the military service were you ever arrested for an offense which did result in or was subject to a trial by court or by summary, special or general court martial? Yes____ No____.

If yes, give date, place, name of arresting agency or type of court martial, charge and action taken for each incident.

_____

12. Character Reference: List three (3) character references. Do not include relatives or present employer.

Name	Address	Phone	City	State	Years Known

Applicant's Initials_____ PHQ

13. Arrest, Detention and Litigation

Have you ever been arrested for any reason whatsoever? Yes____ No____.

If yes, please give details in space provided below. Please list **ALL** cases without exception.

Date of Arrest	Age	Charge	Location City & State	Disposition

13a. Have you or your spouse been involved in any court action, civil or criminal? Yes____ No____.

If so, explain detail below:

_____

_____

13b. Have you ever had your record, civil or criminal, sealed by a court order? Yes____ No____.

If so when?_____ Where?_____

13c. Have you been convicted of a felony or any other crime which would be considered a felony under the laws of the state of Nevada within the last 5 years? Yes____ No____.

If Yes, Where?_____ Charge?_____

Disposition:_____ Date:_____

13d. Have you been convicted of a gross misdemeanor or misdemeanor involving moral turpitude under the laws in the state of Nevada?

If Yes, Where?_____ Charge?_____

Disposition:_____ Date:_____

13e. Have you ever been questioned by a City, State, or Federal Crime Commission? Yes____ No____.

A Grand Jury? Yes____ No____.

If Answer is "Yes", Type of Inquiry:_____

Date:_____ Location:_____

Applicant's Initials_____ PHQ

14. Residences: List all places of residence in the last ten (10) years

From	To	Street & Number	City	State or Country
_____	- _____			
_____	- _____			
_____	- _____			
_____	- _____			
_____	- _____			
_____	- _____			
_____	- _____			
_____	- _____			
_____	- _____			
_____	- _____			

15. Employment: Begin with your most recent job, and list your work history or businesses you have had ownership interest in and /or periods of unemployment for the last ten (10) years. *(Please add additional sheet if necessary)*

_____
From Date Name/Mailing Address of Employer Why did you leave?

_____
To Date Job Title Description of Duties

_____ Was Gaming Present?_____
Name of Supervisor Was Liquor Present?_____

_____
From Date Name/Mailing Address of Employer Why did you leave?

_____
To Date Job Title Description of Duties

_____ Was Gaming Present?_____
Name of Supervisor Was Liquor Present?_____

_____
From Date Name/Mailing Address of Employer Why did you leave?

_____
To Date Job Title Description of Duties

_____ Was Gaming Present?_____
Name of Supervisor Was Liquor Present?_____

_____
From Date Name/Mailing Address of Employer Why did you leave?

_____
To Date Job Title Description of Duties

_____ Was Gaming Present?_____
Name of Supervisor Was Liquor Present?_____

Applicant's Initials_____ PHQ

16. Credit References

Give names and addresses of the individuals, companies, banks, mortgage holders, finance companies or others, to whom you are indebted, or have been indebted, and the extent of your debt. Include any loans on which you are co-maker.

Name of Creditor	Type of loan
Mailing Address	Amount
Name of Creditor	Type of loan
Mailing Address	Amount
Name of Creditor	Type of loan
Mailing Address	Amount

17. I, _____, understand that in case this application is withdrawn or denied, there shall be no refund of any investigation fees paid.

18. I, _____, do hereby certify that I have read and understand Title 2 of the Mesquite City Code entitled **Business License Regulations**, and will abide by its' entirety or any amendments thereto, and furthermore, certify that if a business license application is approved and a business license is issued, it will be accepted by me, subject to the terms and provisions of the applicable Ordinance, and such other rules and regulations as may be, at any time hereafter, adopted or enacted by Resolution or Ordinance by the Mesquite City Council acting as the Licensing Board: and I acknowledge the power and authority of the licensing authorities or other authorized representative to enter any store or business establishment, wherein the licensed business or operation is being conducted, at any time during business hours for the purpose of asserting compliance with the applicable Ordinance, examination of its' Books of Account, or to determine the true parties of interest, including any person(s) who may have loaned or otherwise advanced monies for the operation and conduct of such business:

_____ _____

Signature of Applicant Date

State of Nevada)
ss.
County of Clark)

_____, being duly sworn, says that he has read the foregoing application and knows the contents thereof, and that the same is true of his own knowledge: and, that the same contains a full and true account of the information requested: And, that He executed the same freely and voluntarily and for the uses and purposes therein mentioned, and with the knowledge that misrepresentation or failure to reveal information requested, may be deemed sufficient evidence for refusal to issue or revocation of license applied for, and should license applied for be granted, he agrees to abide by all City, County, State and Federal Laws, and fully understands that failure to do so, may result in revocation proceedings.

Signature of Applicant _____

Subscribed and Sworn to before me this ____ day of _____, 20____.

_____

Notary Public in and for said County and State