

CITY OF NEWPORT, RHODE ISLAND

DAILY LIQUOR LICENSE APPLICATION

Date: _____

TO THE HONORABLE COUNCIL OF THE CITY OF NEWPORT:

Specify Class (F, F-1, or F-2 which?) **CLASS Liquor License**

(Class F is Beer & Wine; Class F-1 is Full Privilege; Class F-2 is Auction)

APPLICANT: _____

DESIGNATION OF APPLICANT(indicate which): _____

(R.I. Non-Business Corp., Religious Org., Political Org. LLC, Corp or Sole Prop.)

BUSINESS ADDRESS: _____

BUSINESS PHONE: _____ ALTERNATE PHONE: _____

Date(s) of Event: _____

Time(s): (specify a.m. or p.m.) _____

Event Name: _____

Location of Event: _____

NOTE: Alcoholic Beverages Must Be Purchased from a Rhode Island Wholesaler Licensee, except Caterers, who must purchase alcoholic beverages from a Rhode Island Class A Package Store.

APPLICANT: _____

SIGNATURE

PRINT APPLICANT NAME/TITLE

FOR OFFICE USE ONLY

ACTION BY COUNCIL _____ DATE _____

FILING FEE **\$15.00** DATE PAID _____

LICENSE FEE DAILY (**F**=\$15, **F-1**= \$35, **F-2**= \$35)

TOTAL LICENSE FEE (for # of ____ Days) IS \$ _____ DATE PAID _____

DATE ISSUED _____ ISSUED BY _____