



**CITY OF FAIRHOPE**  
**P.O. DRAWER 429**  
**FAIRHOPE, AL 36533**  
**251/928-2136**

**ALCOHOLIC BEVERAGE LICENSE APPLICATION**

**PLEASE PRINT**

We hereby apply for a license to sell Alcoholic Beverages in the City of Fairhope or its Police Jurisdiction. We agree to abide by all applicable Ordinances of the City, or any amendments to same, and to promptly furnish all reports required by the City.

APPLICANT/CONTACT NAME \_\_\_\_\_ TAX ID \_\_\_\_\_

AGE \_\_\_\_\_ DATE OF BIRTH \_\_\_\_\_ PLACE OF BIRTH \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

HOME # \_\_\_\_\_ WORK \_\_\_\_\_

CELL # \_\_\_\_\_ EMAIL \_\_\_\_\_

RESIDENCE ADDRESS \_\_\_\_\_

NO. YEARS AT PRESENT ADDRESS \_\_\_\_\_ NO. YEARS AT PREVIOUS ADDRESS \_\_\_\_\_

PREVIOUS ADDRESS \_\_\_\_\_

LEGAL BUSINESS NAME \_\_\_\_\_ DBA \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

BUSINESS TAX ID \_\_\_\_\_ ADOR TAX ID \_\_\_\_\_

BUSINESS LOCATION \_\_\_\_\_

HAS APPLICANT EVER HAD AN ALCOHOLIC BEVERAGE LICENSE BEFORE \_\_\_\_\_

IF SO, WHERE \_\_\_\_\_ UNDER WHAT NAME \_\_\_\_\_

HAS APPLICANT EVER BEEN ARRESTED \_\_\_\_\_ IF SO, WHERE \_\_\_\_\_

WHEN \_\_\_\_\_ WHAT WAS CHARGE \_\_\_\_\_

DISPOSITION \_\_\_\_\_

LIST THREE REFERENCES:

NAME	ADDRESS	PHONE NUMBER



INCORPORATED MEMBERS

LEGAL ENTITY NAME: \_\_\_\_\_ DBA: \_\_\_\_\_

NAME \_\_\_\_\_ SSN \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ AGE \_\_\_\_\_ PLACE OF BIRTH \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

TITLE \_\_\_\_\_ EMAIL \_\_\_\_\_

DRIVER LICENSE NUMBER AND STATE \_\_\_\_\_

WORK PHONE \_\_\_\_\_ CELL PHONE \_\_\_\_\_

NAME \_\_\_\_\_ SSN \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ AGE \_\_\_\_\_ PLACE OF BIRTH \_\_\_\_\_

MAILING ADDRESS \_\_\_\_\_

TITLE \_\_\_\_\_ EMAIL \_\_\_\_\_

DRIVER LICENSE NUMBER AND STATE \_\_\_\_\_

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