

**City of Rossville**  
 438 Main Street P.O. Box 337  
 Rossville, KS 66533

Club, Drinking Establishment and Retail Liquor License Application

APPLICANT INFORMATION				
Application is hereby made for <input type="checkbox"/> Class A Club (\$100.00) <input type="checkbox"/> Class B Club (\$100.00) <input type="checkbox"/> Drinking Establishment (\$100.00) <input type="checkbox"/> Retail Liquor (\$300.00)				
Application for <input type="checkbox"/> New <input type="checkbox"/> Renewal		Application Date: _____		
Name of Applicant: _____				
BUSINESS INFORMATION				
Name of Business to be Licensed: _____				
Business Address	Street: _____	City: _____	State: _____	Zip: _____
Mailing Address	Street: _____	City: _____	State: _____	Zip: _____
Business Phone: _____	24-Hour Phone: _____	E-Mail Address: _____		
Owner of Premises (if different than applicant): _____				
STATE LICENSE INFORMATION				
State License Number: _____			Expiration Date: _____	
<b>A Copy of your new or renewed STATE LICENSE must be submitted with application</b>				
I hereby certify the above information to be true and correct to the best of my knowledge. It is understood that should ownership or location of this establishment change, the license is null and void; it is further understood that in the event this license is not approved by the City Council of Rossville, Kansas, these fees are not refundable or prorated.				
_____ APPLICANT'S SIGNATURE		_____ APPLICANT'S NAME (Please Print)		_____ DATE

For City Clerk Use Only			
Application Approved this _____ day of _____, _____ by the Governing Body of the City of Rossville, Kansas			
License Fee Paid: _____ Amount: \$ _____			
Effective Date: _____	Expiration Date: _____	Date	City Clerk