TEMPORARY LIQUOR PERMIT APPLICATION

Pursi City I	iant to O.P.M.C., Chapter 5.20	Date Submitted:
State	License No.	Fee: \$ 25.00 PER DAY (Nonrefundable)
State License No. Date(s) of Event:		Amount Paid:
Numb	per of Days for event:	
1.	Business Name	
	Telephone No	
	Address of Event	
	City Overland Park State Kansas Zip	
	NATIONAL AND ARCHITECTURE OF THE CONTRACT OF T	
	Mailing Address (If different from event address)	
	City State	Zip
	On behalf of the business named above:	
2.	Applicant's Name Telephone No.	
	Telephone No.	
	Address State	
	City State	Zip
	Date of Birth Driver's License	e No.
3. 1 -	If security personnel is required for event, list location(s) when	here personnel will be stationed:
4.	Are there any anticipated needs for police, fire or other mun	icinal corrigos? No D Vos D
	ii yes, expiani.	
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5.	If event is being held on private property, please attach v	written permission for the event and the service of alcohol from the
	owner of the private property.	-
		is true and correct and understands any license issued hereunder may be
revok	ted for providing false information.	
Date		Applicant's Signature
		Dated this day of ,
		day of ,
		Notary Public
My A	Appointment expires on the day of	,
	FOR OFFICE USE ONLY:	
	Date (approved) (rejected)	
		City Clerk
	I	City Cicik