



# BANNOCK COUNTY BEER, WINE, AND LIQUOR APPLICATION

YEAR OF LICENSE: 2023

NEW \_\_\_\_\_

RENEWAL \_\_\_\_\_

TRANSFER \_\_\_\_\_

(Transfer Fee \$20.00 Flat Fee)

TO THE BOARD OF COUNTY COMMISSIONERS  
BANNOCK COUNTY, STATE OF IDAHO:

Effective November 2020

The undersigned, hereby, makes application to retail:

**LICENSE TYPE:**

1. **Draft, Bottled and Canned Beer Consumed On Premise**
2. **Bottled and Canned Beer Consumed On Premise**
3. **Bottled and Canned Beer Consumed Off Premise**
4. **Bottled and Canned Beer Retail Only**
5. **Kegs To Go**
6. **Growlers**
7. **Wine By the Drink (Even if sold in bottle but poured in glass at table)**
8. **Wine By the Bottle (Bottle can be taken off premise)**
9. **Liquor By the Drink (Includes Wine fees)**
10. **Transfer Flat fee of \$20.00**

**COUNTY FEE:**

- \$100.00
- \$ 75.00
- \$ 25.00
- \$ 25.00
- \$ 25.00
- \$ 25.00
- \$100.00
- \$100.00
- State Liquor Only Fee \$\_\_\_\_\_ X 25%=
- \$ 20.00

**AMOUNT DUE:**

- \$ \_\_\_\_\_
- \$ \_\_\_\_\_
- \$ \_\_\_\_\_
- \$ \_\_\_\_\_
- \$ \_\_\_\_\_
- \$ \_\_\_\_\_
- \$ \_\_\_\_\_
- \$ \_\_\_\_\_
- \$ \_\_\_\_\_
- \$ \_\_\_\_\_

**TOTAL OF ALL FEES**

\$ \_\_\_\_\_

Name of Applicant(s): \_\_\_\_\_ (Individual, LLC, Corporation Name)  
 Doing Business as: \_\_\_\_\_  
 Premise Address: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_  
 Phone Number: \_\_\_\_\_  
 Email Address: \_\_\_\_\_

Please make check or money order payable to:  
**Bannock County,**  
 624 E Center Room 104, Pocatello, ID 83201  
 Auditing Department 208-236-7335

**A CURRENT COPY OF YOUR STATE OF IDAHO RETAIL ALCOHOL BEVERAGE LICENSE MUST BE ATTACHED.**

I HEREBY CERTIFY THAT THE ABOVE STATEMENTS ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND MAKE APPLICATION TO OBTAIN A NEW ALCOHOL BEVERAGE LICENSE WITH BANNOCK COUNTY AND TENDER HERewith THE LICENSE FEE, AS PRESCRIBED BY IDAHO CODE §23. (Sign in the presence of a Notary or a Deputy Auditor at the Bannock County court house.)

Applicant's Signature: \_\_\_\_\_

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_.

Jason C. Dixon  
County Clerk

\_\_\_\_\_  
Deputy Auditor or Notary Public Signature

Commission Expires: \_\_\_\_\_

Residing At: \_\_\_\_\_

For County Use Only:

	STATE	COUNTY	COUNTY FEE
BEER LICENSE	# _____	# _____	\$ _____
WINE LICENSE	# _____	# _____	\$ _____
LIQUOR	# _____	# _____	\$ _____
		TOTAL	\$ _____
		RECEIPT #	_____