

CITY OF MIDDLETON

PO Box 487, 1103 W. Main St.
MIDDLETON, ID 83644
208-585-3133, 208-585-9601 Fax
CITMID@MIDDLETONCITY.COM

BEER WINE APPLICATION/LICENSE

YEAR June 1, 2018– May 31, 2019	OFFICE USE ONLY:
☐ New License	RECEIPT
□ Renewal	#
SALE FOR ON-PREMISE CONSUMPTION	¢
() BEER (\$200.00)	LICENSE
() WINE (\$200.00)	#
SALE FOR OFF-PREMISE CONSUMPTIO	N
() BEER (\$50.00) () WINE (\$200.00)	
Applicant Name:	
Business Name:	
Business Address (Street/P.O. Box/City/Zip):	
Mailing Address (Street/P.O. Box/City/Zip):	
Business phone:	Other Phone:
Email address:	
● Attach copy of application for State license, including a copy of site and floor plans submitted with state application.	
• Attach a copy of your State and County Alcohol Beverage Licenses before a City license will be issued.	
Date	Applicant Signature
Date	Applicant Signature
	Print Name
LICENSE	
Application Approved by City Council on (da Application Denied:	te):
License is hereby issued this day of	, 20
City Clerk	_
Notes:	