

3. OWNERSHIP.

List all persons having financial interest or control in the business. List all partners, officers, directors and shareholders owning 10% or more stock. Sole proprietors shall also include their spouse even if the spouse owns 0% interest. If not married, write "No Spouse".

Name	Complete Home Address (Include City, State & Zip)	Position (owner, spouse, partner, president, etc.) List SS# for each.	US Citizen (yes or no)	Date of Birth			Percent Of Ownership
				M	D	Y	

		SS#					

		SS#					

		SS#					

		SS#					

You must show 100% ownership of the business. Failure to list all interested parties is unlawful and constitutes grounds for denial or revocation of the license. (Attach additional sheets, if necessary.)

=100%

3-1. Corporation ID Number *required* for Corporations, Limited Liability Companies, Limited Partnerships, and Limited Liability Partnerships: _____

4. CRIMINAL HISTORY

The following questions apply to the applicant named in section 1 and all persons listed in section 3-1. Each question applies to criminal histories for all persons, within and outside Iowa. **Include detailed explanation for all yes responses on an attached sheet.**

4-1. Y N Have you ever been convicted of a felony offense in Iowa or any other state of the United States? If yes, list in section **4-3**.

4-2. Y N Are there any arrests, indictments or summonses pending against you? If yes, list in section **4-3**.

4-3. List below all arrests, indictments, summonses, convictions and deferred judgments of ALL violations of any state, county, city, federal or foreign government for the applicant listed in **section 1** and all persons listed in section **3-1**. All information must be reported regardless of the disposition, even if dismissed or expunged. Include pending charges. **DO NOT** include minor traffic violations, except those which are alcohol-related. *(Attach an additional sheet, if necessary.)*

Name	Date of Arrest	Charge	*Disposition of Arrest	Location of Court (County, State, Federal)	Citizenship Lost? (yes/no)

Attach copy of the Disposition of the Court for each violation noted. Attach copy of Restoration of Citizenship where loss of citizenship is indicated. **If there are no arrests, indictments, summonses or convictions, write "NONE".*

7. ENDORSEMENT OF LOCAL AUTHORITY

I hereby certify that this Application was submitted to:

_____ on _____
City Council or County Board of Supervisors Date

And after conducting pertinent background investigations of the applicant and proposed licensed premises, it is recommended

that the license/permit designated below be: **Approved** **Denied***

If approved, requested license/permit effective date: _____

Indicate location of premises:

- Within incorporated city/town
- Within unincorporated area of county. Name of nearest incorporated town: _____
- Within unincorporated town. Name of unincorporated town: _____

Name of City or County Signature of City or County Official (_____) Daytime Phone

**If the application is denied, attach a separate sheet giving specific reasons for the denial.*