



Springville City

BUSINESS LICENSING DEPARTMENT
 110 South Main, Springville, Utah 84663
 Phone: 801-489-2704 Fax: 801-489-2716
www.springville.org

BEER LICENSE RENEWAL FORM

Name of Business	Phone #	DBA #	Type of License Class A () Class B () Class C ()
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Business Address

Street: _____ City: _____ State: _____ Zip: _____

PLEASE NOTE: Renewal Form and License Fee of \$600.00 (Class A) or \$300.00 (Class B & C) are due on or before **December 31**. Failure to meet the renewal requirements shall result in automatic forfeiture of the license; effective on the date the existing license expires. Springville City Code §7-3-7(2)

PLEASE COMPLETE THE FOLLOWING: (Incomplete renewal forms may be subject to delay in processing or forfeiture of license.)

- I understand all persons selling alcoholic beverages must be 21 years old or older. _____ (Initial)
- I understand that all employees who sell beer or directly supervise the sale of beer must complete the statewide alcohol training and education seminar required by Utah Code Sections 32A-10-103 and 62A-15-401 and be certified within 30 days of the date they are hired. _____ (Initial)
- I understand that I must abide by all the laws and regulations of the Utah Beverage Control Act and Springville City Ordinance, Title 7, Section 3, Beer Sales. _____ (Initial)
- There are no changes from the original application regarding owner, applicant, partnership, officers, or directors for said beer license. _____ (Initial) (NOTE: If any changes in owner, applicant, officers, or directors please contact the licensing department immediately.)
- I hereby certify as licensee that I have not been convicted of any felony or of violation of any law or ordinance relating to alcoholic beverages, or of drunken driving, or of keeping a gambling or disorderly house in the last twenty-four months. _____ (Initial)
- I understand that Springville City will conduct random audits of the license holders, and if the licensee is found to not be in compliance, said beer license is subject to revocation. _____ (Initial)

I certify under penalty of perjury, the foregoing statements are true to the best of my knowledge and belief. I understand that my filing of a materially false statement may constitute fraud and subject me to criminal prosecution.

Date: _____ Print: _____ Sign: _____

STATE OF UTAH }
 } ss On the _____ day of _____, 20_____, _____
 COUNTY OF UTAH } personally appeared before me and, being by me duly sworn, did say the foregoing statements are true to the best of his/her knowledge and belief.

NOTARY PUBLIC residing in _____ My Commission Expires _____

Notary Signature _____

OFFICE USE ONLY

DATE RECEIVED: _____ City License # _____

Notes: _____