



CITY OF CAPE GIRARDEAU

CAPE GIRARDEAU MO 63702-0617

P O BOX 617

PH: 573-339-6322 FAX: 573-339-6306

APPLICATION FOR RESTAURANT-BAR LICENSE SUNDAY SALES (AMUSEMENT)

Applicant, _____ d/b/a _____, hereby requests that a license be issued for a restaurant-bar, whereby applicant may sell intoxicating liquors between the hours of 11:00 a.m. and midnight on Sunday. Applicant hereby certifies that he meets the following standards:

1. That he has an establishment whose business building contains a square footage of at least 6,000 square feet, and where games of skill commonly know as billiards, volleyball, indoor golf, bowling or soccer is usually played and which has annual gross receipts of at least \$200,000.00 of which no more than 50% may be derived from the sale of alcoholic beverages.
2. That applicant possesses a license under Chapter 5 of the Code of Ordinances of the City of Cape Girardeau, Missouri, to sell intoxicating liquors.

Applicant is aware that in order to secure a Restaurant-Bar license he must, in addition, secure all other State and County Licenses required under the Revised Statutes of Missouri, applicant has been issued License No. _____, to operate a facility at _____, Cape Girardeau, Missouri, and here by applies for a Restaurant-Bar License to be operated in conjunction with his restaurant business on Sundays at _____, Cape Girardeau, Missouri.

_____ applicant signature

(Corp. Managing Officer/Proprietor/All Partners)

MUST BE THE SAME AS ORIGINAL LICENSE APPLICATION

Dated this _____ day of _____, 20____.

This liquor license application was approved by the City Council at their meeting on _____, 20____.

CITY MANAGER