



CITY OF HARRISON APPLICATION FOR ALCOHOL LICENSE RENEWAL
February 28, 2025, to February 28, 2026

TOTAL AMOUNT OF \$ _____ ENCLOSED

I / WE HEREBY APPLY FOR RENEWAL OF:

Alcohol License Type	State Fee	Annual Fee	City Fee
Liquor by the drink (including beer, wine by glass or bottle and hard liquor)		75% of State Fee	
Keg to Go License with Liquor by the Drink		75% of State Fee	
Beer and Wine by the drink (without liquor by the drink)		75% of State Fee (not to exceed \$200.00 each)	
Retail Wine by the Bottle		75% of State Fee (not to exceed \$200.00)	
Retail Beer		25% of State Fee	
Keg to Go License without Liquor by the Drink		25% of State Fee	
		TOTAL DUE	

OWNER / BUSINESS INFORMATION AS IT SHOULD APPEAR ON LICENSE:

(IF MORE THAN ONE OWNER – PLEASE LIST ADDITIONAL INFORMATION ON A SEPARATE SHEET AND ATTACH)

Business Type: ☐ Individual ☐ Partnership ☐ LLC ☐ LLP ☐ Corporation

Applicant Name: _____ Business Phone: _____

Doing Business As: _____ Business License # _____

Primary Contact Name & Phone: _____

Physical Location: _____ Harrison, ID 83833

Mailing Address: _____

Premises Hours of Alcohol Sales or Service _____

Within 300' of School or Place of Worship ___No ___Yes (attach explanation if selected Yes)

PLEASE ATTACH: ___ **Copy of 2025-2026 Idaho State License**
 ___ **Copy of 2025-2026 Kootenai County License**
 ___ **City Utility Account Number**

Persons Ineligible For License: No license shall be granted to any applicant who is disqualified under the laws of the state of Idaho and Kootenai County to hold such a license, nor to any applicant whose water, sewer and garbage account with the city is more than sixty (60) days past due. (Ord. 351, 6-2-1998)

I / We hereby certify the above-named business, ownership, directors, stockholders, or partner's information above is true and correct.

Applicant Signature _____ **Date** _____

Date Subscribed and sworn to me this ___ day of _____, 2025.

Notary Public for Idaho: _____

Residing at: _____

My Commission Expires: _____