



Office of the City Manager
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Application for Alcohol Beverage License

New Application

Renewal Application

Business Name	
Federal ID Number	
Business Address	
City/State/Zip	
Business Phone Number	
Email	

Mailing Address	
City/State/Zip	

Parent Company Name (If different than business name.)	
Address	
City/State/Zip	

Applicant's Full Name	
Applicant's Title	
Applicant's Address	
City/State/Zip	
Applicant's Phone Number	
Applicant's Driver License #	

Property Owner	
Address	
City/State/Zip	

I hereby certify the above information is true and correct to the best of my knowledge.

Signature

Date

ABLE License Number

License Type	License Fee	License Type Requested (Mark Box)
Brewer	\$1,250.00	<input type="checkbox"/>
Oklahoma Brewer	125.00	<input type="checkbox"/>
Bonded Warehouse	190.00	<input type="checkbox"/>
Storage	23.00	<input type="checkbox"/>
Distiller	3125.00	<input type="checkbox"/>
Winemaker	625.00	<input type="checkbox"/>
Oklahoma Winemaker	75.00	<input type="checkbox"/>
Rectifier	3,125.00	<input type="checkbox"/>
Mixed Beverage—Initial	1,005.00	<input type="checkbox"/>
Mixed Beverage—Renewal	905.00	<input type="checkbox"/>
Caterer/Mixed Beverage Combination	1,250.00	<input type="checkbox"/>
Caterer—Initial	1,005.00	<input type="checkbox"/>
Caterer—Renewal	905.00	<input type="checkbox"/>
On Premises Beer and Wine—Initial	500.00	<input type="checkbox"/>
On Premises Beer and Wine—Renewal	450.00	<input type="checkbox"/>
Hotel Beverage—Initial	1,005.00	<input type="checkbox"/>
Hotel Beverage—Renewal	905.00	<input type="checkbox"/>
Wine and Spirits Wholesaler	3,000.00	<input type="checkbox"/>
Beer Distributor	750.00	<input type="checkbox"/>
Retail Package Store	905.00	<input type="checkbox"/>
Bottle Club	1,000.00	<input type="checkbox"/>
Retail Wine	1,000.00	<input type="checkbox"/>
Retail Beer	500.00	<input type="checkbox"/>
Small Brewer Self-Distribution	750.00	<input type="checkbox"/>
Brewpub License	1,005.00	<input type="checkbox"/>
Brewpub Self-Distribution	750.00	<input type="checkbox"/>
Mixed Beverage-Service or Fraternal Organization Exempt Under IRS 501(c)	500.00	<input type="checkbox"/>

Individual History Form

- Individual History sheets must be completed for Applicant, Owner(s), Partners and Corporate/Company Officer(s).

Full Name	
Residence Address	
City/State/Zip	
Personal Telephone	
Business Telephone	

Driver License #	
Color of Eyes	
Place of Birth	
Date of Birth	
Hair Color	
Height	
Weight	

United States Citizen		
If No, Alien Registration #		
Naturalized Citizen		
	(Date)	(Location)

Criminal Record

A criminal records check will be made on all applicants, owners, partners and corporate/company officers in the normal processing of the application. If information is falsified, it may constitute grounds for revocation of the license.

Have you ever been convicted of, or plead guilty to, a felony? Yes No

Have you ever been convicted (including probation, sentencing, or bail forfeiture) of any crime, violation, or infraction of any law? (Do not include minor traffic violations for which a fine or bail forfeiture of \$50.00 or less was imposed.) Yes No

Are there presently pending against you any criminal charges, violations or infractions of the law? Yes No

Have you ever been convicted of a violation of any state or federal law to alcoholic beverages, or forfeited any bond while any such charge was against you? Yes No

If you have answered "YES" to any of the above, list below.

Offense	Date	City	State

Affidavit of Applicant and Officers

Locations and dates of residence for Applicant, Owner(s), Partners and Corporate/Company Officer(s) for the past three (3) years:

Name: _____ **Title:** _____

Address and dates of residence for past three years:

Location	Date
_____	_____
_____	_____
_____	_____

Name: _____ **Title:** _____

Address and dates of residence for past three years:

Location	Date
_____	_____
_____	_____
_____	_____

Name: _____ **Title:** _____

Address and dates of residence for past three years:

Location	Date
_____	_____
_____	_____
_____	_____

I hereby certify the above information is true and correct to the best of my knowledge.

Signature

Date

Required Attachments

- Copy of current Oklahoma Sales Tax Permit
 - Copy of current ABLE License
 - Copy of current Oklahoma Department of Health Permit
 - Copy of property deed or current lease
 - Copy of Articles of Incorporation (New applicants and only if incorporated.)
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- ✓ New establishments must submit a copy of their ABLE License to the City Clerk's office prior to the issuance of the City of Stillwater license.
 - ✓ Fire and building inspections will be conducted as determined by the Fire Department and Development Services Department. Failure to meet and maintain all applicable code requirements for health and safety reasons may result in denial or revocation of license.