

TOWN OF GONZALES
GONZALES, LOUISIANA

MANAGER, AGENT, and BARTENDER PERMIT APPLICATION

(Where a manager, agent or bartender is employed, this schedule must be executed by that person and by each officer of a corporation which makes application for an alcoholic beverage permit)

Date _____

Name _____ Sex _____ Race _____

Address: _____

Date of Birth _____ Place of Birth _____

1. Are you a citizen of the United States and the State of Louisiana and over eighteen (18) years of age? _____ Yes _____ No
how did you become a citizen? _____
If Naturalized, when and where did you get your second papers? _____
2. Have you resided in the State of Louisiana continuously for a period of not less than two years next preceding the date of filing of this application? _____ Yes _____ No
3. Have you ever been charged for a misdemeanor or felony under the laws of the United States, State of Louisiana, or any other state? _____ Yes _____ No
(If any charges were dismissed you will need to attach a copy of court minutes reflecting this information)
4. Have you ever been convicted in this state or in any other state in the United States of soliciting for prostitution, pandering, letting premises for prostitutes, contributing to a juvenile, keeping a disorderly place, letting a disorderly place, or dealing in narcotics? _____ Yes _____ No
5. Have you had a license or permit to sell or deal in alcoholic beverages issued by this state or any other state of the United States revoked within five (5) years prior to the date of this application? _____ Yes _____ No
6. Have you been convicted or had judgment against you involving alcoholic beverages by this state or any other state of the United States within five (5) years prior to the date of this application? _____ Yes _____ No
7. Have you ever been convicted of violating any of the provisions of the Beer or Liquor Laws of this state? _____ Yes _____ No

8. Have you ever been convicted of violating any local parish or city ordinance? _____ Yes _____ No _____

9. Previous Employment -List last place of employment first:

(1) Date: From _____ to _____

Firm: _____ Address _____

Duties: _____

Reason for leaving: _____

(2) Date: From _____ to _____

Firm: _____ Address _____

Duties: _____

Reason for leaving: _____

(3) Date: From _____ to _____

Firm: _____ Address _____

Duties: _____

Reason for leaving: _____

10. Record of Previous Arrests(if any)

Type of Offense _____

Date & Place of Arrest _____

Disposition: _____

TOWN OF GONZALES

_____, being duly sworn on oath, disposes and says that he/she had read each of the questions to which he/she has made answer, and that his/her answers in each instance are true and correct.

SWORN TO AND SUBSCRIBED BEFORE ME, This _____ day of _____, 20____

Signed: _____

(Partner, Manager, Agent, Bartender or Officer of Corporation)

Notary Public: _____