Town of Wilkesboro Beer/Wine License Application

An Equal Opportunity/ Employer

Applications may be mailed to PO Box 1056 or hand delivered to: 203 West Main Street, Wilkesboro, NC 28697-1056.

www.wilkesboronc.org

Instructions

- To obtain a Beer/Wine license, this application must be legible and completed in full.
- Any changes to ownership, address, or numbers should be reported within 10 business days. A \$5 fee will be charged to reissue the license reflecting the changes.
- A COPY OF YOUR STATE ISSUED BEER/WINE LICENSE IS REQUIRED TO OBTAIN A BEER/WINE LICENSE WITH THE TOWN OF WILKESBORO.

Business Name:						Р	Phone	No.			
Physical Address:											
Mailing Address:											
					•	(City			State	Zip
Federal Tax ID No.						State Sales Tax ID No.					
	•										
Email Address:						Fax No	ο.				
Business Owner's Name:						Contact Phone No.					
Home Address:											
						Ci	ity			State	Zip
Landlord's Name:					Landlord's Phone No.						
Landlord's Address:								· ·			
					•	Cit	ity			State	Zip
Sole Proprietorship Partnership Corporation Limited					ed Liability Corporation			Home Based Occupation			
Does your business s	sell Alco	holic beverages?	No	Yes	Manu	ıfacturer:	:	No	Ye	s	
Beer/Wine	Wine	Beer	On Pre	mise	Off Premise			Both			
Does your business have more than one location in Wilkesboro?)		Yes			
Nature of Business:						Restaurant					
Date Business Begar	or will	Begin in Wilkesbo	ro								

The undersigned applicant certifies that the information provided within this application is correct and accurate. The applicant acknowledges that his/her Beer/Wine License is subject to suspension or revocation if false or misleading information is provided.

Signature:	Date:

~ Town Use Only ~

License Code(s):	License Fee:
	Total Fee Due: \$
	Amount Paid: \$
	Received by