

CITY OF LAS VEGAS  
**Art Gallery – Complimentary Beer/Wine Permit (Part 2)**

**GENERAL INSTRUCTIONS:**

1. Complete the entire questionnaire in a legible manner, either hand printed or typed in black ink.
2. If a particular area does not apply to you, answer it with N/A (not applicable).
3. If the space available is insufficient, use a separate sheet and precede each answer with the number of the referenced block.
4. Do not misstate or omit any material fact(s) since the statements made by you in this application are subject to verification. You must initial each page as provided in lower right corner to indicate that you have read the information as provided and it is correct.
5. Any applications that are submitted must be complete. Incomplete applications will be returned to you, thus lengthening the time needed to complete the investigation.
6. This application is an official document and misrepresentation or failure to reveal information requested is sufficient cause for the denial of a license or permit.

Business Name (DBA): \_\_\_\_\_

Complete business address: Number, Street Name, City, State, and Zip: \_\_\_\_\_

**Section I Personal Information:**

1. Last name	First name	Middle name
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Aliases, nicknames, maiden name, other name changes – legal or otherwise \_\_\_\_\_

2. Present residence address ( <i>number/street or RFD</i> )	City – Post Office	State/Zip
Present business address	City – Post Office	State/Zip
Type of work	Phone ( <i>residence</i> ) (       )	( <i>business</i> ) (       )

3. Date of birth	Place of birth ( <i>City, county, state</i> )	Age
Social Security number	Height	Weight
	Color of eyes	Color of hair
Sex	Scars, tattoos, or distinguishing marks, and/or characteristics	Driver's license number
		State by which issued

4. Are you a citizen of the United States? Yes    No	If no, list alien registration number	If naturalized, list certificate number
Date of naturalization	Place of naturalization (City, state)	

**Section II Residences:**

5. List ALL residences for the last five years, Beginning with the most recent. (Use additional pages if necessary).

FROM – TO (month/year)	ADDRESS (Number & Street or Rural Address)	CITY / STATE	COUNTRY (if not USA)

**Section III Employment:**

6. Begin with your most recent employment and list your work history, businesses you have been involved in, and/or periods of unemployment back for the last five years. (Use additional pages if necessary)

From date	Name and mailing address of employer/business	
To date	Job title	Why did you leave?
Salary	Name of supervisor	Description of duties
From date	Name and mailing address of employer/business	
To date	Job title	Why did you leave?
Salary	Name of supervisor	Description of duties

**Section IV Licensing History:**

7. In the last five years, have you held any type of business or professional license in any state? Yes No  
 If yes, please provide the below information (Use additional pages if necessary):

Dates held: FROM – TO (mo/yr)	Type of license	City, county, and state in which held

8. In the last five years, have you appeared before any licensing agency or similar authority within the State of Nevada, or any other state or country, for any reason whatsoever? Yes No  
 If yes, please submit the details (Use additional pages if necessary).

Date (mo/yr)	Location (City, State)?	What agency?	Why?

9. In the last five years, have you been denied any business or professional license whatsoever, or denied a finding of suitability, or been a participant in any organization which has been denied a license or finding of suitability? Yes No  
 If yes, please submit the details (Use additional pages if necessary).

Date (mo/yr)	Location (City, State)?	What agency?	What organization?	Why?

10. In the last five years, have you had any business or professional license whatsoever suspended, revoked, or been otherwise disciplined, or been a participant in any organization which has had any license whatsoever suspended, revoked, or been otherwise disciplined? Yes No  
 If yes, please submit the details (Use additional pages if necessary).

Date (mo/yr)	Location (City, State)?	What agency?	What organization?	Why?

**Section V Legal History:**

11. Have you ever been arrested for ANY REASON WHATSOEVER, or issued a citation (excluding speeding and parking citations)?  
Yes No  
If yes, give the details. Use additional pages if necessary. LIST ALL CASES WITHOUT EXCEPTION

Date (mo/yr)	Age	Location (City, State)	Arresting agency	List all charge(s)	Disposition

12. Have you ever been involved in any court action, civil or criminal (not including divorces)?  
Yes No  
If yes, give the details. Use additional pages if necessary. LIST ALL CASES WITHOUT EXCEPTION

Date (mo/yr)	Court & location (City, State)	Parties to the action	What was the case about?	Disposition

Have you ever had a record, civil or criminal, sealed by a court order? Yes No  
(If yes, give details including where sealed and when, on a separate sheet of paper. LIST ALL CASES WITHOUT EXCEPTION)

The undersigned makes the following declarations subject to the penalty for perjury and says:

I, \_\_\_\_\_ do hereby certify that I have read and understand  
(Print your name)

the \_\_\_\_\_ ordinance,  
(type of permit applied for)

and will abide by its entirety or any amendments thereto. I further agree that, if this application is approved and a license or work card issued, it will be accepted by me, subject to the terms and provisions of the applicable ordinance and such other rules and regulations as may be, at any time hereafter, adopted or enacted by resolution or ordinance of the licensing board. I acknowledge the authority of the licensing and regulating authorities and their representatives to enter any business establishment wherein the licensed business is being conducted at any time during business hours, for the purpose of determining compliance with the applicable ordinance or to determine the true parties or interest, including any person(s) having an interest in the licensed business, or person(s) who may have loaned or otherwise advanced monies for the operation and conduct of such business.

State of \_\_\_\_\_

County of \_\_\_\_\_

Signed and Sworn to or Affirmed to before me this \_\_\_\_\_ day

of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant

by \_\_\_\_\_  
Signature of Notarial Office