



CITY OF KINSTON
BEER & WINE PRIVILEGE LICENSE
APPLICATION

FOR THE YEAR APRIL 1, 2021 THROUGH MARCH 31, 2022

Check One (✓): *New* _____ *Renewal* _____

Check One (✓): *Beer & Wine On-Premises \$30.00* _____ *Beer & Wine Off-Premises \$15.00* _____

Directions: This information is also being requested to update our files. Please fill-in-all-blanks.

ZONING
___ Approved ___ Denied
POLICE
___ Approved ___ Denied
FIRE CHIEF
___ Approved ___ Denied

Date: _____

Customer Number _____

Name of Business: _____

Mailing Address: _____

City, State, Zip: _____

E-mail Address: _____

THE FOLLOWING INFORMATION MUST BE FURNISHED BEFORE LICENSE WILL BE ISSUED:

CHECK ONE (✓): ___ INDIVIDUAL ___ PARTNERSHIP ___ CORPORATION

IF INDIVIDUAL OR PARTNERSHIP, LIST NAME(S) AND ADDRESS (ES): IF CORPORATION, NAME AND ADDRESS OF PRESIDENT AND SECRETARY.

(A) _____

(B) _____

Telephone Number: Business: () - _____ Other: () - _____

PHYSICAL LOCATION OF BUSINESS: _____

If New Business, Date Operation Began: _____

Brief Description of Business to be Operated: _____

Should this privilege license be automatically renewed each year? ___ YES ___ NO

This application must be filed with the City of Kinston Tax office prior to opening a new business. Upon receipt of payment and approval of application, a license will be issued. License should be posted at your business location.

PLEASE FORWARD APPLICATION AND PAYMENT TO: **CITY OF KINSTON TAX OFFICE**
ATTN: ANNETTE MEREADY, REVENUE COLLECTOR
POST OFFICE BOX 339
KINSTON, NC 28502

If you have any questions concerning this application form, please call the **TAX OFFICE** at **(252)939-3140**.

No person, unless exempted, may conduct any business within the city without first paying the tax required by the City Code or without a valid privilege license issued pursuant to the City Code.

PENALTY: 5% per month retroactive to September 1.

Under penalty prescribed by law, I hereby affirm that the information provided on this application, including both cash and credit sales, are true to the best of my knowledge and belief.

SIGNED: _____ **TITLE:** _____

APPLICANT'S MAILING ADDRESS: _____

APPLICANT'S TAX ID #: _____