

SUPPORTIVE INFORMATION

A copy of your completed State of Kentucky Application(s) for the license(s) requested, including a copy of all attachments, will serve as supportive information for this application. The APPLICANT IS RESPONSIBLE for furnishing legible copies with this application in addition to their original State application(s). Each copy shall be considered a part of the City of Hurstbourne application.

AFFIDAVIT

I, _____, _____,
(Name of person signing affidavit) (Title)

of _____, _____
(Name of applicant) (Printed Name of person signing affidavit)

do hereby solemnly swear that all statements made and information given in this application, accompanying documents and other materials are true and correct to the best of my knowledge, information and belief, and that I am familiar with all laws, rules and regulations governing the business for which application is made, and that in the conduct of the business authorized by the license herein applied for all such laws, rules and regulations will be strictly obeyed, and that I have read KRS 243.500 of the Alcoholic Beverage Control Law relative to causes for revocation or suspension of license.

Signature of Applicant

Sworn to and subscribed before me this _____ day of _____, 20_____.

My Commission expires _____.

Notary Public

FOR CITY USE ONLY

This certifies that the applicant herein above named has been approved for the type of license(s) applied for and at the premises above specified.

Date _____.

STATE OF KENTUCKY

COUNTY OF JEFFERSON

CITY OF HURSTBOURNE

Tyler Johnson
Alcoholic Beverage Control Officer