



**COLORADO RIVER INDIAN TRIBES
LIQUOR CONTROL BOARD
APPLICATION FOR LIQUOR LICENSE**

NOTICE: Application must be completed in its entirety and signed. No modifications of any kind may be made. **PAYMENTS RECEIVED ARE NON-REFUNDABLE.** Please read the Instructions before completing this Application. Please type or write legibly.

TRANSACTION TYPE (check only one)	
<input type="checkbox"/> New License Application <input type="checkbox"/> Renewal	<input type="checkbox"/> Change in Ownership <input type="checkbox"/> New or Changed Business Location <input type="checkbox"/> Other (identify: _____)

TYPE OF LICENSE REQUESTED (check all that apply)	
<input type="checkbox"/> Class 1 – ON-SALE RETAILER OF LIQUOR <input type="checkbox"/> Class 2 – ON-SALE RETAILER OF BEER AND WINE ONLY <input type="checkbox"/> Class 3 – OFF-SALE RETAILER OF LIQUOR <input type="checkbox"/> Class 4 – OFF-SALE RETAILER OF BEER AND WINE ONLY <input type="checkbox"/> Class 5 – WHOLESALER <input type="checkbox"/> RENEWAL (CLASS 1 / CLASS 5) <input type="checkbox"/> RENEWAL (CLASS 2 / CLASS 3 / CLASS 4) <input type="checkbox"/> Special Event License (1 to 4 days) Indicate date when special event starts: _____ (mm/dd/yyyy)	FEE: \$ 1200.00 (includes \$200 application fee) FEE: \$ 700.00 (includes \$200 application fee) FEE: \$ 700.00 (includes \$200 application fee) FEE: \$ 700.00 (includes \$200 application fee) FEE: \$ 1200.00 (includes \$200 application fee) FEE: \$ 185.00 (includes \$35 application fee) FEE: \$ 110.00 (includes \$35 application fee) FEE: \$ 35.00 (includes \$10 application fee)
<input type="checkbox"/> EXPEDITED DELIVERY (for Express Mail delivery of your license) ADDITIONAL FEE: \$ 15.00	

BUSINESS INFORMATION
1. BUSINESS NAME: _____ 2. FEDERAL EMPLOYER IDENTIFICATION NUMBER (EIN): _____ 3. BUSINESS STREET ADDRESS (including City, State and Zip Code): _____ _____ 4. BUSINESS MAILING ADDRESS (IF DIFFERENT): _____ 5. BUSINESS TELEPHONE NUMBER: _____ 6. BUSINESS FAX NUMBER: _____ 7. EMAIL ADDRESS: _____ 8. DATE LIQUOR SALES START(ED): _____

OWNER, CONTACT PERSON OR AGENT CONTACT INFORMATION
9. PRINCIPAL OWNER NAME (OR, IF CORPORATION, CONTACT PERSON OR AGENT): _____ 10. PRINCIPAL OWNER MAILING ADDRESS: _____ 11. PRINCIPAL OWNER TELEPHONE NUMBER: _____ 12. PRINCIPAL OWNER FAX NUMBER: _____ 13. CRIT TRIBAL MEMBER? () YES () NO IF YES, ENROLLMENT NO.: _____ 14. ENROLLED AT ANOTHER INDIAN TRIBE? () YES () NO IF YES, NAME OF TRIBE: _____ 15. NAMES OF ALL PERSONS WITH AN ECONOMIC INTEREST IN THE BUSINESS, INCLUDING THE NATURE AND EXTENT OF INTEREST: _____ _____

(Attach additional sheets if necessary)

ADDITIONAL BUSINESS INFORMATION

- 16. TYPE OF BUSINESS: () FOR PROFIT () NON-PROFIT
17. BUSINESS CLASSIFICATION: () SOLE PROPRIETORSHIP () PARTNERSHIP () CORPORATION
() LIMITED LIABILITY COMPANY () I.R.S. 501(C) CERTIFIED ORGANIZATION
() OTHER (DESCRIBE):
a. IF CORPORATION, INDICATE STATE(S) OR TRIBE(S) WHERE INCORPORATED:
18. LIQUOR SALES DESCRIPTION: () BY THE DRINK () PACKAGED LIQUOR
19. CRIT LEASE FOR BUSINESS PREMISES? () YES () NO
20. HAS THE BUSINESS BEEN ISSUED A CRIT BUSINESS LICENSE IN THE PAST 5 YRS? () YES () NO If yes, BL #:
21. HAS THE BUSINESS BEEN ISSUED A CRIT LIQUOR LICENSE IN THE PAST 5 YRS? () YES () NO If yes, LL #:
22. HAS THE PRINCIPAL OWNER PREVIOUSLY APPLIED FOR A CRIT LIQUOR LICENSE UNDER ANOTHER NAME? () YES () NO
If yes, under what name:
23. HAS ANY LIQUOR LICENSE HELD EVER BEEN SUSPENDED, REVOKED OR DENIED? () YES () NO
If yes, explain:
24. HAS THE PRINCIPAL OWNER OR ANY OFFICERS, DIRECTORS AND STOCKHOLDERS WHO OWN 10% OR MORE OF THE BUSINESS
BEEN CONVICTED OF A FELONY IN THE PAST 5 YEARS? () YES () NO
If yes, explain:
25. ARE YOU LICNESED BY ANY STATE OR CITY GOVERNMENT? () YES () NO
If yes, enter License Number and Type:
26. ARE YOU INSURED AS REQUIRED BY THE TRIBES' HEALTH AND SAFETY CODE SECTION 2-408(B)? () YES () NO
If yes, enter name of insurance carrier:

CONSENT AND VERIFICATION

27. BY SIGNING BELOW, I UNDERSTAND AND AGREE TO THE FOLLOWING CONDITIONS OF LICENSE:

Each licensee shall comply with all tribal laws, including but not limited to: Health and Safety Code, tribal business and tax laws, Indian employment and contracting preference laws and applicable federal law governing the manufacture, distribution, and sale of liquor. The licensee is required to comply with any additional tribal laws as such laws are enacted by the Tribal Council, and obtain any other licenses or permits required by applicable law.

Each licensee consents to the jurisdiction of the Tribal Court as to any cause of action arising in connection with the sale of liquor within the reservation, at retail or wholesale. Each licensee consents to the service of process of the Tribal Court with respect to all actions over which the Tribal Court has subject matter jurisdiction, in accordance with the rules of procedure of the Tribal Court.

Each retail licensee understands and agrees that retailers are not be permitted to buy liquor, beer or wine for resale except from wholesalers licensed by the Tribes' Liquor Control Board.

Each licensee shall respond in a timely manner to requests by the Liquor Control Board for information about the licensee's business.

I DECLARE THAT I HAVE EXAMINED THIS APPLICATION AND THE INFORMATION CONTAINED HEREIN, AND TO THE BEST OF MY KNOWLEDGE AND BELIEF, IT IS TRUE AND CORRECT. I SWEAR OR AFFIRM THAT I HAVE READ AND WILL COMPLY WITH ALL TRIBAL LAWS APPLICABLE TO MY BUSINESS AND CONSENT TO THE JURISDICTION OF THE TRIBAL COURT OF THE COLORADO RIVER INDIAN TRIBES AND SERVICE OF PROCESS IN MATTERS ARISING FROM THE CONDUCT OF LIQUOR SALES.

Signature: Date:
Print Name:

Please make check/money order payable to "CRIT Liquor Control Board." NO CASH ACCEPTED.

Please mail or return your completed application and payment to:

CRIT LIQUOR CONTROL BOARD
c/o CRIT Department of Revenue and Finance
26600 Mohave Road
Parker, Arizona 85344
Phone: (928) 669-1336
Email: taxinfo@crit-nsn.gov

FOR OFFICE USE ONLY - DO NOT WRITE IN THIS SPACE

FEE PAID: CHECK NO.: DATE PAID:
LIQUOR LICENSE NO.: DATE ISSUED: DATE EXPIRES:
APPROVED BY: