



CITY OF CRESTVIEW HILLS, KENTUCKY  
APPLICATION FOR TEMPORARY BEER LICENSE

Application must be presented with a copy of the approved State of Kentucky Temporary License

Name, business address and telephone number of applicant:

**APPLICANT:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_

Person or persons authorized to sign application:

**NAME & TITLE:** \_\_\_\_\_

**ADDRESS:** \_\_\_\_\_

**PHONE:** \_\_\_\_\_

Period to be covered by the license:

Month      Day Year      through      Month      Day Year  
\_\_\_\_\_

How will the beer be served: \_\_\_\_\_

Amount of City License Fee: \$25.00 \_\_\_\_\_

\_\_\_\_\_  
Name: (Please Print)

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

\_\_\_\_\_  
Signature of Approving City Agent      Date