

# APPLICATION FOR ALCOHOLIC BEVERAGE TAX CERTIFICATE OF REGISTRATION

Ordinance 2004-14  
Chapter 3.59

-Borough Use Only-

\_\_\_\_\_  
Account Number

Date of Application: \_\_\_\_\_

## IMPORTANT NOTICE

Send white copy to:  
Fairbanks North Star Borough  
Treasury & Budget Division  
PO Box 71320  
Fairbanks AK 99707-1320  
(907) 459-1443

### SECTION I. PREMISES TO BE REGISTERED (Must be completed, one per location)

1. Business Name:			
2. Business Location (Number & Street):		Mailing Address if different	
3. Legal Description of Business Location (Lot#, Block#, and Subdivision):		PAN/Real Property TAX I.D. #:	
4. Business Location: Fairbanks ( ) North Pole ( ) Borough/Outside Cities ( ) Date business started:			
5. Primary Contact Person:		Title:	Phone:

### SECTION II. OPERATOR INFORMATION (Must be completed)

1. Alaska Business License #:	Expiration Date:	Standard Industry Code (SIC):	
2. Alaska Liquor License #:	Expiration Date:		
3. Type of Business Organization (check one):			
<input type="checkbox"/> Sole Proprietor <input type="checkbox"/> Partnership <input type="checkbox"/> Corporation			
<input type="checkbox"/> Joint Venture <input type="checkbox"/> Business Trust <input type="checkbox"/> Other (list)			
4. Type of Business (check one)			
<input type="checkbox"/> Club <input type="checkbox"/> Beverage Dispensary <input type="checkbox"/> Package Store <input type="checkbox"/> Wholesale - General			
<input type="checkbox"/> Pub <input type="checkbox"/> Brewery <input type="checkbox"/> Restaurant/Eating Place <input type="checkbox"/> Golf Course			
5. Name of Business Organization:		Business Phone:	
6. Mailing Address of Business Organization:			
7. Name(s) of Business Owner(s), Corporate Officers, General Partner(s), or Trustee. Use additional sheets as necessary			
Full Name (print):		Title:	Phone:
Full Name (print):		Title:	Phone:
Full Name (print):		Title:	Phone:

### SECTION III. DECLARATION (Must be completed)

I declare that I have examined this application, including any accompanying listings, and to the best of my knowledge and belief, it is true, correct, and complete. If any of the above information changes, I will contact the Fairbanks North Star Borough immediately. I further certify that I have received a copy of Chapter 3.59 of the FNSB Code, Alcoholic Beverage Tax and understand the responsibilities, liabilities and requirements set forth therein.

Name and signature of owner, general partner, trustee, or corporate officer of business to be registered.

Name (Print): \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_