



Sunday Sales Request

_____ Applicant/Officer or Agent wishes to apply for Sunday Alcohol Sales for
_____ (business name), located at
_____ (business address).

_____ CPA verification which complies with City Ordinance Chapter 4 Section 14.1 (a).

Before me the undersigned attesting authority in and for said State and County, came the undersigned deponent, who being duly sworn deposes and says on oath that the information within this application and affidavit is true and correct and will comply with all city ordinances and state laws.

Signature _____

Printed Name and Title _____

E-mail Addr: _____

Phone Nbr: _____

Date _____

Sworn to and subscribed before me

This _____ day of _____, 20____

Notary Public