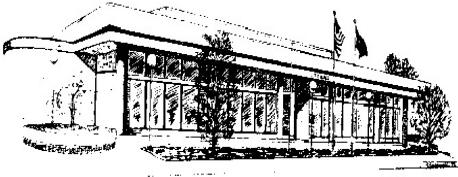


ALCOHOLIC BEVERAGE CONTROL LICENSE RENEWAL



City of Mayfield
211 East Broadway
Mayfield, Kentucky 42066

APPLICATION FOR RENEWAL OF LIMITED RESTAURANT ALCOHOLIC BEVERAGE BY THE DRINK LICENSE.

NAME OF LICENSEE _____
ADDRESS _____
TELEPHONE NUMBER _____

Mail completed Renewal Application and a certified check or money order made payable to City of Mayfield to:

City of Mayfield, ABC Officer
211 East Broadway
Mayfield, Kentucky 42066

RENEWAL APPLICATIONS SHALL BE FILED **15 DAYS PRIOR TO APRIL 1, 2007**

RENEWAL YEAR: 2007/2008
FEE: \$ 1,000.00
DATE ISSUED: _____

1. Is the applicant the owner of the premises to be licensed? YES NO
If no, you must file a copy of your Lease covering the full license period for the premises to be licensed and the date the Lease expires.
If the Applicant is not the owner of the premises to be licensed, please provide the following:

NAME _____
ADDRESS _____
AGE _____ **CITIZENSHIP** _____

2. I hereby state that there have been no changes brought about during the past year which would necessitate a new application being made, nor has anyone interested in this License been convicted of a felony or misdemeanor, directly or indirectly related to the sale of alcoholic beverages since this License was last renewed. If changes have been made, a statement giving full details will be attached. My last application filed with the Department is incorporated and made a part of this application.

NOTE: ATTACH LIST OF ALL NEW OFFICERS, IF LICENSEE IS A CORPORATION.

Applicant Signature

Telephone Number

SUBSCRIBED AND SWORN TO BEFORE ME THIS _____ DAY OF _____ 2007

NOTARY PUBLIC
commission expires: _____