

**APPLICATION FOR A CABARET LICENSE**

**FEE: \$25.00**

1. NAME OF APPLICANT(S): \_\_\_\_\_

2. TRADE NAME: \_\_\_\_\_

3. ADDRESS OF BUSINESS: \_\_\_\_\_

CITY: \_\_\_\_\_ COUNTY: \_\_\_\_\_ STATE: \_\_\_\_\_

4. MAILING ADDRESS: \_\_\_\_\_

IF RENEWING, WHAT TYPE OF LIQUOR LICENSE ARE YOU OPERATING UNDER:

\_\_\_\_\_  
(TYPE OF LICENSE)

LIQUOR LICENSE NO. \_\_\_\_\_, WHICH EXPIRES \_\_\_\_\_

The following is to be signed by individual, each general partner of partnership and by corporate applicants.

INDIVIDUALS AND ALL GENERAL  
PARTNERS OF PARTNERSHIPS MUST  
SIGN HERE:

CORPORATIONS SIGN HERE:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

(Pres, Vice Pres. or Secretary)

DATE \_\_\_\_\_

DATE \_\_\_\_\_

**APPROVAL OF LOCAL LICENSING AUTHORITY**

Dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

By \_\_\_\_\_  
Chair of the Pueblo County Liquor and Marijuana Licensing Board

Attest \_\_\_\_\_  
Clerk, Secretary or other officer having the official seal of licensing authority