



**APPLICATION FOR
SUNDAY ALCOHOLIC BEVERAGE PERMIT**

Morton County, North Dakota

Application is hereby made for a Sunday Alcoholic Beverage Permit for the retail on and/or off sale of alcoholic beverages by licensee as follows:

Name of Licensee _____

Name of Business _____

Mailing Address _____ Phone # _____

Sunday(s) applied for: _____

Hours of Sale & Consumption _____

By making this application, the applicant hereby certifies that:

1. I have read and understand the current Morton County Liquor License Regulations
2. To post the Sunday Event Permit in a conspicuous public place on the Event Permitted Premises.

Signed this _____ day of _____, 20____.

BY: _____
Licensee

TITLE: _____