

## **Restaurant Beer/Wine Lottery Application**

General Information							
1.	City Quota Area Applying For: (Required)						
Plea	se Note:						
-	y one lottery application per person will be accepted. "Person" as defined in ARM 42.12.401 means any individual, partnership, limited liability company, corporation or association.						
2.	Legal Applicant/Owning Entity						
	(Please do not use "Doing Business As")						
	Mailing Address						
	City, State, Zip						
	Contact Person Daytime Contact Phone						
** C	Check the seating capacity for your restaurant. □ 60 or fewer □ 61 to 100 □ 101 or more						
	ot filing as an individual, please list all individuals with $10\%$ or more ownership interest on the statement on back of this form.						
3.	Do you currently own a retail on-premises consumption license at the location for which you intend to apply?						
	☐ Yes ☐ No If yes, you do not qualify for entry in the lottery.						
4.	Have you transferred a retail on-premise consumption license within the last 12 months?						
	☐ Yes ☐ No If yes, you do not qualify for entry in the lottery.						
	Preferences Section						
prio	Preference" will be given to a full service restaurant owner that has either operated at least 12 months immediately r to the lottery deadline in the quota area being applied for or was an unsuccessful lottery applicant from a previous aurant beer/wine lottery in the quota area being applied for.						
1.	Has your restaurant operated as a "restaurant" (as defined below) and has it operated at least 12 months immediately prior to the lottery application in the quota area in which you are applying?    Yes   No						
	If yes, what is the trade name and physical address of the premises?						
cons	staurant" means a public eating place where individually priced meals are prepared and served for on-premises sumption. The restaurant must have a dining room, a kitchen, and the number and kinds of employees necessary for preparation, cooking, and serving of meals in order to satisfy the department that the space is intended for use as a service restaurant. A full-service restaurant is a restaurant that provides an evening dinner meal.						
2.	If your business is seasonal, has your restaurant operated as a "restaurant" and has it operated at least 12 months (during your normal business season) immediately prior to the lottery application in the quota area in which you are applying?   Yes  No						
3.	Have you been an unsuccessful lottery applicant (in the same quota area in which you are now applying) in a previous restaurant beer/wine lottery held by the Department of Revenue?						
	☐ Yes ☐ No If yes, please provide the information requested below.						
(The	e entity applying must be identical to your previous lottery application)						
Date	e of LotteryCity where applied Applicant Name						

## Ownership Information (includes Corporations, LLC's, LLP's and Partnerships)

Name	Address	Social Security Number		Date of Birth	Number of Share/ Percentage of Ownership	
					1	
					-	
The officers and directors of the corp	oration are (please print).					
Name	Address	T		Title		
	REQUIRED TO SIGN AND C	OMPLETE	THE SEC	TION BELO	OW:	
, declare under penalty of false swearing that the Print Name						
Print N information on this corporate statemen						
Signature	•	D	ate			
Declaration and Affidavit						
If my application is drawn in the lotter appropriate fees within 30 days of being concerning ownership on this applicat I will be disqualified. For example, if your subsequent license application m	ng notified that I was the succession must be consistent with the li you complete this application as	ful applicant cense applic	. I further u	inderstand that upporting doc	at information cuments or	
This is an important event and claiming obtaining one of the licenses. We will license application and investigation preference; your application will be di	confirm those claiming a preference or costs. If you are given a preference or costs and the costs are given a preference or costs and the costs are confirmation as the costs are confirmation as the costs are confirmation.	nce actually nce, and you	meet the sta	atutory defini eligible to cla	tion during im such	
<b>Important:</b> You must return this lotte complete, it will be disqualified. For in please call us at (406) 444-6900 or (86)	nformation concerning the deadli	ne for the sp	ecific area	where you are	e applying,	
Signature		D	Pate			
Printed Name	Title					