



SPIRIT LICENCE APPLICATION FORM

TO : The Chief Public Health Inspector
Kingston & St. Andrew Health Department

Dear Sir,

As it is my intention to apply to the Justices at the next licencing session to be held at the Half Way Tree Resident Magistrate Court in the said parish of St. Andrew for a spirit licence under Law Chapter 364, I beg to inform as follows;

Name of Applicant _____
Surname First/Other Names

Telephone #: _____

a) Nature of Licence:

- Proprietary Club Hotel Town-off Town Retail
- Village Retail Tavern Wholesale

b) (i) Name & Address of Business (state as nearly as may be the position of same) _____

_____ **(ii) Parish** _____

c) Whether applicant has ever before held a licence under this Law or any other Law, repealed thereunder, and if so, when and where, and whether licence was at any time forfeited.

Yes	No
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d) Whether or not the premises for which licence is desired has during the past twelve (12) months been licensed under this or any other Law.

Yes	No
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e) Whether the applicant is able to read and write and keep accounts book in English.

Yes	No
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f) Whether the applicant has any time within five (5) years prior to the application been convicted of any offence against this Law or repealed by this Law and I request that you cause the premises to be inspected.

Yes	No
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Yours Sincerely,

Signature of Applicant

Date _____
Day/Month/Year

NB: APPLICATIONS CLOSE TWENTY-ONE (21) DAYS BEFORE THE DATE OF THE SCHEDULED SESSION.