LEGAL NOTICE

FORMAT FOR PUBLICATION OF ORIGINAL PERMIT APPLICATION

Check Applicable Phrases

	I, _			
		(Sole Owner's Name)		
	We	e, the partners of		
	(Partnership Name)			
	We	e, the officers of		
		(Corporation Name)		
	I/VV	/e, the member(s) of		
		(Limited Liability Company Name)		
	I, ti	he trustee of(Name of Trust)		
ntend to	n ma	(Name of Trust) ske application for:		
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	, ,			
As prov	ded	for by the Local Option Alcoholic Beverage Control Laws, Section 67-1-1, et seq., of the Mississippi Code of 1972,		
		If granted such permit, I or We propose to operate as a		
	()	sole owner		
	()	partnership		
	()	corporation		
	()	limited liability company		
	()	trust		

Under the trade name of			_
Located at			_
(Street)	(City)	(County)	
The name(s), title(s) and address(es) of the owner(s)/partners/corpor of the above named business are:	orate officer(s) and/or i	majority stockholder(s)/ member(s)/ trustee
			- -
If any person wishes to request a hearing to object to the issuance and received by the Department of Revenue within (15) fifteen days Requests shall be sent to:		_	in writing
Chief Counsel, Legal Division			
Department of Revenue			
P. O. Box 22828			
Jackson, MS 39225			
Date of First Publication:	_		
This theday of,			