COUNTY OF KAUAI DEPARTMENT OF LIQUOR CONTROL 4444 RICE STREET, SUITE 120 LIHUE, KAUAI, HAWAII 96766

PHONE: (808) 241-4966 • FAX: (808) 241-6585

APPLICATION FOR OFF PREMISES WAREHOUSING

NAME OF LICENSEE	DATE
STREET ADDRESS OF WAREHOUSE	TAX MAP KEY
LICENSE NUMBER(S) OF ESTABLISHMENT(S) TO BE USING THE WAREHOUSE	
DATE AND CIONATURE OF LICENOPE	
DATE AND SIGNATURE OF LICENSEE	
Attach scale drawing of floor plan of the ward	ehouse and lease agreement (if annlicable)
Attach scale drawing of noor plan of the ward	chouse and lease agreement (if applicable).
COMMISSION ACTION AND DATE	
COMMISSION ACTION AND DATE	